PODOMAS/ITALETAR 960

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Southeast DS. Corp.

000007811530-- C -09/18/02--01009--007 *****87.50 *****87.50

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

| Enclosed are an orig | final and one (1) copy of the arti | cles of incorporation and | d a check for: |
|----------------------|--|--|--|
| \$70.00 Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | ☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED |
| FROM: | Veronica Denise Simmons Name (Printed or typed) | | |
| | P.O. Box 448 | Address | |
| | Hawthome, FL 32640 City, State & Zip | | |
| | 352-222-2040 | elephone number | |
| | Dajime receptose number | | |

NOTE: Please provide the original and one copy of the articles.

D. WHITE NOV 19 2002



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RECEIVED
02 NOV 18 PM 4: 37

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

September 19, 2002

VERONICA DENISE SIMMONS PO BOX 448 HAWTHORNE, FL 32640

SUBJECT: DS, CORP.

Ref. Number: W02000027304

We have received your document for DS, CORP, and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Document Specialist New Filings Section

Letter Number: 202A00053433

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I **NAME**

The name of the corporation shall be:

Do Corp.

DS Southeast, Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Physical:

P.O. Box 448

4445 SW 35th Terrace Suite 100

Hawthome, FL 32640

Gainesville, FL 32608

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

The general nature of the business to be transacted by this corporation is any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE IV **SHARES**

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

NA

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Veronica Denise Simmons 5680 SR 13 NLB

St. Augustine, FL 32640 32092

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Veronica Denise Simmons

5680 SR 13 NLB

St. Augustine, FL 31

32092

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

09/13/02 Signature/Registered Agent Date

Signature/Incorporator

09/13/02

Date