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| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP | ☐ WAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE
TALLARASSEE, FLORIDA

TRANSMITTAL LETTER

| Department of State Division of Corpora P. O. Box 6327 Tallahassee, FL 323 | tions | - · · - | |
|-------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUBJECT: | DyCo Servic (PROPOSED CORPORA) | es, Inc. TENAME- <u>MUSTINCL</u> I | DE SUFFIX) |
| Enclosed are an orig | rinal and one (1) copy of the arti | cles of incorporation and | a check for: |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | □ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | Filing Fee, Certified Copy & Certificate of Status |
| FROM: | Lorenzo M. Llera | S (Printed or typed) | |
| | 3501 SW Second Avenue, Suite 2500 Address | | |
| | Gainesville, Flo | rida 32607 State & Zip | e de la companya de l |
| 352-371-0067 Daytime Telephone number | | | |

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

ARTICLES OF INCORPORATION OF DyCo Services, Inc.

ARTICLE I - NAME

The name of the corporation shall be DyCo Services, Inc.

ARTICLE II - DURATION

This corporation shall have perpetual existence.

ARTICLE III - PRINCIPAL OFFICE AND CORPORATE ADDRESS

The principal office address shall be: VLN 1025, P.O. Box 25685, Miami, Florida 33102-5685.

ARTICLE IV - PURPOSE

The purpose of this corporation is to engage in any services, activities or business permitted under the laws of the United States and the State of Florida.

SECRETARY OF STATE A
TALLAHASSEE, FLORIDA
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ARTICLE V - SHARES

The maximum number of shares which this corporation is authorized to have outstanding is 1,000 shares of common stock having a par value of \$1 per share.

ARTICLE VI - INITIAL BOARD OF DIRECTORS

The initial Board of Directors shall consist of two members. The number of Directors may be increased or decreased from time to time by amendment to, or in the manner provided in, the Bylaws of the corporation. The names and addresses of the Directors constituting the initial Board of Directors are:

| NAME | ADDRESS |
|-----------------|-------------------------------------------------------|
| Yanny Di Febbo | VLN 1025, P.O. Box 25685 Miami, Florida 33102-5685 |
| Dianna Di Febbo | VLN 1025, P.O. Box 25685 Miami, Florida 33102-5685 |

ARTICLE VII - INITIAL REGISTERED OFFICE AND AGENT

The initial registered office of this corporation shall be 3501 S.W. 2nd Avenue, Suite 2500, Gainesville, Florida 32607 and the initial registered agent shall Lorenzo M. Lleras.

ARTICLE VIII - INDEMNIFICATION

The corporate shall indemnify, to the full extent permitted by law, any officer, director, employee or agent of the corporation, or any former officer, director, employee or agent of the corporation.

ARTICLE VIII - INCORPORATOR

The name and street address of the Incorporator is:

NAME

ADDRESS

Lorenzo M. Lleras

3501 SW Second Avenue, Suite 2500 Gainesville, Florida 32607

Vorenzo M. Lleras

Incorporator

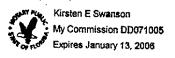
STATE OF FLORIDA

) SS:

COUNTY OF ALACHUA)

The foregoing Articles of Incorporation of DyCo Services, Inc. were acknowledged before me on this 3 day of December, 2002 by Lorenzo M. Lleras as the Incorporator.

NOTARY PUBLIC



ACCEPTANCE OF REGISTERED AGENT

Having been named to accept service of process for DyCo Services, Inc., at the place designated in the Articles of Incorporation, Lorenzo M. Lleras agrees to act in this capacity and agrees to comply with the provisions of Section 48.091, Florida Statutes, relative to keeping open such office.

Lorenzo M. Lleras

Date

SECRETARY OF STATE TALLAHASSEE, FLORIDA