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SECRETARY OF STATE
TALLAMASSEE, FLORIDA

An inter

TRANSMITTAL LETTER

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

SUBJECT: DYAL TONES MOBILE AUDIO, Inc.
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: _	ÍRISTIN DYAL Name	(Printed or typed)	
<u> </u>	Po. Box 1343	Address	
-	CRAWFOR DVILLE	FL 323210 State & Zip	
	850-926-84" Daytime 1	75 Telephone number	

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

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:	a vener d			-		
DYAL TONES MOBILE AUDI	O, Inc	•				
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Po. Box 1343 CRAWFORDVILLE, FL 32326		,				
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	-					7.5
ARTICLE IV SHARES The number of shares of stock is: 1 (one)		- 1	SECRETARY OF STALLAHASSEE, FL	03 OCT 13 AM	FILED	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	<u>.</u>	· • • • • •	ORDA ORDA	3 MH II: 27		
KRISTIN DYAL, President P.O. BOX 1343 CRAWFORDVILLE, FL 32326 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:						
KRISTIN DYAL 154 TAFFLINGER Rd.	-				-	-
CRAWFORDVILLE, FL 32327 ARTICLE VII INCURPORATOR	ARTIC	LE I		Effe	ecti	ve
The <u>name and address</u> of the Incorporator is: KRISTIN DYAL PO. BOX 1343	13 th	Octo	ber	20	03)
CRAWFORDVILLE, FL 32326	*****	*****	*****	****	***	= -
Having been named as registered agent to accept service of process for the above st certificate, I am familiar with and accept the appointment as registered agent and agr	tated corporation this ree to act in this	on at the p s capacity	olace desi	gnated	in thi	s
Signature/Registered Agent	- 10	Dai	I D	3		
Signature/Incorporator	Id	Dat	CT (ාප		- ;