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TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
04 APR 16 10 11:02

4-4-16

TRANSMITTAL LETTER

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

SUBJECT: DIMS GROUP, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: STEVEN J. DAVIS
Name (Printed or typed)

173 STRAWBERRY LANE
Address

JACKSONVILLE, FLORIDA 32259
City, State & Zip

904-287-3126
Daytime 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:

DIMS GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

173 STRAWBERRY LANE
JACKSONVILLE, Florida 32259

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

N/A 1

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

STEVEN J. DAVIS CEO/PRESIDENT
173 STRAWBERRY LANE
JACKSONVILLE, Florida 32259

ARTICLE VI REGISTERED AGENT

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

STEVEN J. DAVIS
173 STRAWBERRY LANE
JACKSONVILLE, Florida 32259

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STEVEN J. DAVIS
173 STRAWBERRY LANE
JACKSONVILLE, Florida 32259

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

Steven J. Davis
Signature/Registered Agent

4-16-04
Date

Steven J. Davis
Signature/Incorporator

4-16-04
Date

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04 APR 19 PM 11:18