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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

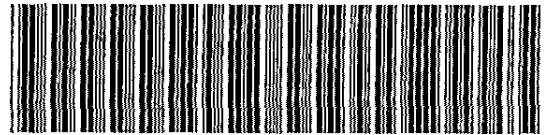
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/11/05 PM 2:23

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FEDERAL BUREAU OF INVESTIGATION  
U.S. DEPARTMENT OF JUSTICE

15

2-10

## TRANSMITTAL LETTER

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

SUBJECT: D & F RENTALS, 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: D & F RENTALS, INC.  
Name (Printed or typed)

1467 DOLPH RD  
Address

JACKSONVILLE, FL. 32220  
City, State & Zip

904-786-9630  
Daytime Telephone number

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

FILED  
05 MAR 11 PM 2:28  
TALLAHASSEE, FL 32314

# 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:

D & F RENTALS, INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1467 DOLPH RD  
JACKSONVILLE, FL. 32220

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LIMITED LIABILITY AND OWNERSHIP

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

DALE RHODEN 1467 DOLPH RD, JACKSONVILLE, FL 32220 PRESIDENT

Floyd Vickera 8140 Orquerra St. Jacksonville FL 32220 Vice President

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

DALE RHODEN 1467 DOLPH RD JACKSONVILLE, FL. 32220

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DALE RHODEN 1467 DOLPH RD JACKSONVILLE, FL. 32220

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CLERK OF CIRCUIT COURT  
JACKSONVILLE, FLORIDA

\*\*\*\*\*

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

Dale Rhoden  
Signature/Registered Agent

3-9-05  
Date

Dale Rhoden  
Signature/Incorporator

3-9-05  
Date