

PO6000/2/381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

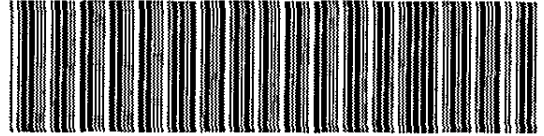
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/21/06--01006--013 **78.75

FILED

06 SEP 21 AM 10:39

SECRETARY OF STATE
ALBANY, NY 12242

COVER LETTER

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

SUBJECT: DIXON & DIXON, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: HOWARD P DIXON
Name (Printed or typed)

1759 WATERVIEW DRIVE
Address

LEESBURG, FL 34748
City, State & Zip

352-728-8081
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:

DIXON & DIXON, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1310 NORTH SHORE DRIVE, STE B, LEESBURG, FL 34748

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO DO ANY AND ALL LAWFUL BUSINESS

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):

HOWARD P DIXON DIRECTOR, 1759 WATERVIEW DR, LEESBURG, FL 34748
DOLLY E DIXON DIRECTOR, 1759 WATERVIEW DR, LEESBURG, FL 34748

ARTICLE VI REGISTERED AGENT

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

BERYL N STOKES, III, CPA, 1035 WEST DIXIE AVE, LEESBURG, FL 34748

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BERYL N STOKES, III, CPA, 1035 WEST DIXIE AVE, LEESBURG, FL 34748

ARTICLE VIII EFFECTIVE DATE September, 6 2006


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



Signature/Registered Agent

✓ 9/15/06

Date



Signature/Incorporator

✓ 9/15/06

Date