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COVER LETTER

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

SUBJECT:	(PROPOSED CORPORAT	.	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
FROM:	LAURIE PAR	CHER Printed or typed)	
	5200 BLUEB	ERRY HIL	1 AVENUE
	LAKE WORTH), FLORIDA	4 33463
	951-44	E 10000	

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

Daytime Telephone number

** 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: DNI CREATIVE SERVICES MC ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
5200 BLUEBERRY HILL AVENUE LAKE WORTH, FLORIDA 33463 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
POOL SERVICE	
ARTICLE IV SHARES The number of shares of stock is:	77 - 111:35 77 - 111:35 78 - 111:35
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	in the
LAURIE PARCHER - PRESIDENT	,
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agen LAURIE PARCHER	t is:
5200 BLUEBERRY HILL AVENUE LAKE WORTH, FLORIDA 33463 ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is: LAURIE PARCHER 5200 BLUEBERRY HILL AVENUE	
LAKE WORTH, FLORIDA 33463	*******
Having been named as registered agent to accept service of process for the above stated corporation at certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capa	
Signature/Registered Agent	5 2006 Date .
Signature/Incorporator	Date 5-2006 Date