

P0700097401

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STA.  
TALLAHASSEE, FLORIDA

07 AUG 30 PM 4:25

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8/30/07

## COVER LETTER

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

SUBJECT: Dico D 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: Donovan A Dixon

Name (Printed or typed)

186 Sandalwood Drive

Address

Kissimmee, Florida 34743

City, State & Zip

(407) 348 5339 (407) 962 7851

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:

Dico D.Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

186 Sandalwood Drive  
Kissimme,FL 34743

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Delivery

## ARTICLE IV SHARES

The number of shares of stock is:

2

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Donovan A Dixon 186 Sandalwood Drive Kissimmee FL 34743 - President  
Michele A Valentine 186 Sandalwood Drive Kissimmee FL 34743 - Vice President

## ARTICLE VI REGISTERED AGENT

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

Donovan A Dixon  
186 Sandalwood Drive  
Kissimmee FL 34743

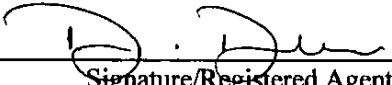
## ARTICLE VII INCORPORATOR

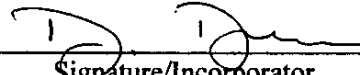
The name and address of the Incorporator is:

Donovan A Dixon  
186 Sandalwood Drive  
Kissimmee FL 34743

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*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

  
\_\_\_\_\_  
Signature/Incorporator

FILED  
07 AUG 30 PM 4:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8/27/07  
\_\_\_\_\_  
Date

8/27/07  
\_\_\_\_\_  
Date