

P10000064625

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

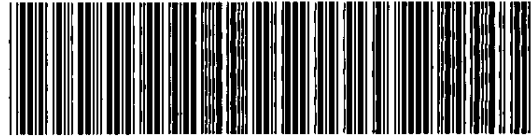
(Business Entity Name)

(Document Number)

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

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
2010 AUG -5 PM 2:08

8/9/10

COVER LETTER

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

SUBJECT: Dine Jax, 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: Dean Porter  
Name (Printed or typed)

9838 Old Baymeadows Rd # 281  
Address

Jacksonville, FL 32256  
City, State & Zip

904-923-3243  
Daytime Telephone number

admin@dinejax.com  
E-mail address: (to be used for future annual report notification)

2010 AUG - 5 PM 2: 08  
H. J. JOHNS  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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)

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**ARTICLE I NAME**

The name of the corporation shall be: Dine Jax, Inc.

2010 AUG -5 PM 2: 08

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

9838 Old Baymeadows Rd #281  
Jacksonville, FL 32256

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Marketing & Advertising

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000,000  
One million

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Dean Porter - Co-founder, V.P.  
Sherri Linden - Co-founder, Pres. } 8655 Hunters Creek Dr. S.  
Jacksonville, FL 32256

**ARTICLE VI REGISTERED AGENT**

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

Sherri Linden 8655 Hunters Creek Dr. S.  
Jacksonville, FL 32256

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Dean Porter 8655 Hunters Creek Dr. S.  
Jacksonville, FL 32256

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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*

Sherri Linden Sherri Linden

Signature/Registered Agent

8/1/2010  
Date

[Signature]

Signature/Incorporator

8/1/2010  
Date

Dean Porter