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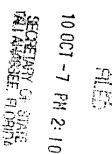
<u> </u>				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Ilad JOHA BLOWN GAVE				
AUTHORIZATION BY FRONE TO				
COR) FOT Alticle I-rane				
DATE				
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Office Use Only



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10 OCT -7 AHII: 22

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS Division of Corporations

September 29, 2010

ILLA BROWN & JOHN JULLETTE 3500 OCEAN BEACH BLVD #5 COCOA BEACH, FL 32931

SUBJECT: SDOLLAR KINGS\$ INC. Ref. Number: W10000045586

We have received your document for \$DOLLAR KINGSS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6901.

Pamela Smith Regulatory Specialist II New Filing Section

Letter Number: 410A00023167

COVER LETTER

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

SUBJECT: \$Dollar	King\$ inc.		
		ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles 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 CO	PY REQUIRED
		llette e (Printed or typed)	
3500 Ocean Beach Blvd. #5 Address			
Coc	oa Beach, Fl. 32931 City	, State & Zip	
321	-613-2609	Felephone number	
john	andila@yahoo.com	ed for future annual report r	notification)

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			
The name of the	e corporation shall be:		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing add	ress, if different is:
	5240 N. Atlantic Avenue Suite 120		ch Blvd #5
	Cocoa Beach, FL 32931	Cocoa Beach, Fl	_32931
ARTICIÆ III	PURPOSE		
	r which the corporation is organized is:		
Retail Sale			
			TAG TO
ARTICLE IV			
The number of s	shares of stock is: 2		A R BE
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	rs.	
Name and	Title: ILA J. BROWN - President	Name and Title:	S
Address:	3500 Ocean Beach Blvd #5	Address:	5 福 二
	Cocoa Beach, FL 32931		127
Noma one	d Title: JOHN JULLETTE - Vice President	Name and Titles	
Address:		Address:	
Address.	Cocoa Beach, FL 32931	Address.	
	30000 D00011 L 02001		
Nama and	f Title:		
Address:	1 Title	Address:	
1144.0351			
	REGISTERED AGENT	Calca manistana di manata im-	
Name:	Florida street address (P.O. Box NOT acceptable) o ILA J. BROWN	the registered agent is:	
Address:	3500 Ocean Beach Blvd #5	-	
1144.000.	Cocoa Beach, Fl. 32931	- .	
	•	-	
ARTICLE VI	· ·······		
-	address of the Incorporator is:		
Name: Address:	ILA J. BROWN	<u>-</u>	
Address:	3500 Ocean Beach Blvd #5 Cocoa Beach, FL 32931	<u></u>	
	amed as registered agent to accept service of process		
inis cerujicaie, i	I am familiar with and accept the appointment as reg	nsterea agent ana agree to act	ін ініх сарасну
, 0 1	la 1 Ba- a		15 11 15
	Required Signature/Registered Agent		10 · 4 - 10
	-Required Signature/Registered Agent		Date
I submit this de	ocument and affirm that the facts stated herein are	true. I am aware that the fa	dse information submitted in a
	Department of State constitutes a third degree felon		
<i>~</i>	Required signature/Incorporator		10 -4 -10 Date
	Required Signature/Incorporator		Date