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COVER LETTER

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

SUBJECT: Dee Jays Central Corp.	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 & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED	
FROм: David J. Zeller		
Name (Pr	rinted or typed)	
6109 Sherwin Dr.	ress	
Port Richey, Fl. 34668 City, Sta	te & Zip	JISIAIG JAS
352-540-0502 Daytime Telep		100 JO KC ANVL 320 378 4 320 378 4 320
djz9@aol.com E-mail address: (to be used fo	or future annual report notification)	OF STATE

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) SECRETARY OF STATE **NAME** Dee Jays Central Corp. The name of the corporation shall be: 2011 JAN - 6 PM 1: 11 PRINCIPAL OFFICE Principal street address Mailing address, if different is: 6109 Sherwin Dr Port Richey Fl. 34608 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Retail sales of Office Furniture and Equipment ARTICLE IV SHARES The number of shares of stock is: 1000 INITIAL OFFICERS AND/OR DIRECTORS Name and Title: David J. Zeller President, Treasurer Name and Title: ___ Address: 6109 Sherwin Dr Port Richey, Fl. 34608 Name and Title: Anne M. Keady Vice President, Secretary Name and Title: 6109 Sherwin Dr. Address: Port Richey, Fl. 34608 Name and Title: Name and Title: Address:

ARTICLE VI REGISTERED AGENT

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

Name:

ARTICLE II

David J. Zeller

Address:

Address:

Address:

Address:

10420 Belltower St

Spring Hill Fl. 34608

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

David J. Zeller

Address:

6109 Sherwin Dr.

Port Richey, Fl 34668

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

Required Signature/Registered Agent

1-3-2011 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

1-3-2011