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DEPARTMENT OF CORPORATIONS TO THE PROPERTY OF CORPORATIONS TO THE PROPERTY OF TH

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SECRETARY OF STATE
ALLAHASSEE STATE

1/1/

COVER LETTER

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

SUBJECT: DJ Wireless		
SUBJECT: Driveless (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		
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) sed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00	
Filing Fee Filing Fee	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate o Status
	ADDITIONAL CO	OPY REQUIRED
FROM: Darryl Rull Name	(Printed or typed)	
14 N. adams St	ddress	
Quincy FL, 3.	235 State & Zip	
850 - 2811-447 Daytime Te	S lephone number	
darry Rud Du E-mail address: (to be used	Louicem for luture annual report	notification)

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

ARTICLES OF INCORPORATION

in compila	nee with Chapter 607 and/of Cha	pter 021, r.s. (Floin)		ED
ARTICLE I NAME The name of the corporation shall be:	3 wireless In	c.	11 FEB -8	IM O. E
ARTICLE II PRINCIPAL OFFIC				
Principal street ad	dress 5 street	Mailing address	s. HALLAHASSEE	OF STA <u>L.F</u> LOF
				
ARTICLE III PURPOSE The purpose for which the corporation is a same of the corporation in the corporation is a same of the corporation in the corporation is a same of the corporation in the corporation in the corporation is a same of the corporation in the corporation in the corporation is a same of the corporation in the corporation in the corporation is a same of the corporation in the corporation in the corporation is a same of the corporation in the corpora	organized is:			
,				
RTICLE IV SHARES the number of shares of stock is: 100				
Name and Title: President / Address: 30 Pine B	SAND/OR DIRECTORS Derry Ruth Name Address Addr	ess:		_
	Name Addr	e and Title:ess:		
Name and Title:Address:	Name Addr	and Title:		
RTICLE VI REGISTERED AGE		stered agent is:		
Name: Derry Randdress: 30 Pine 1		·		
RTICLE VII INCORPORATOR	•			
e name and address of the Incorporator Name: Address: 30 Pine Ba			•	
Midway, Fo aving been named as registered agent to	L 323 y 3 accept service of process for the			ted in
is certificate, I am familiar with and acce			2 - 8 -1 (·	
Required Signat	ure/Registered Agent		Date	
submit this document and affirm that the cument to the Department of State const.	he facts stated herein are true. I	am aware that the false		d in a
00-0 0			2-8-11	
Required Sign	nature/Incorporator		Date	