## P12000036667

(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:				

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04/16/12--01042--028 \*\*78.75

2012 APR 16 PH 2: 22
TALLAHASSEE, FLORIS.

J. Shivers APR 17 2012

## **COVER LETTER**

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

SUBJECT: DIL Appraisals, Inc					
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )					
	•				
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:			
\$70.00	\$78.75	\$87.50			
Filing Fee Filing Fee & Certificate of Status	Filing Fee	Filing Fee,			
& Certificate of Status	& Certified Copy	Certified Copy & Certificate of			
		Status			
	ADDITIONAL C	OPY REQUIRED			
Danathard Laws					
FROM: Dorothy I. Long  Name (Printed or typed)					
rumo (rimica or typou)					
1113 Avocado Isle					
ΑΑ	ddress	2012 APR 16			
Faitha dadah El 000	.4 =		1		
Fort Lauderdale, FL 33315 City, State & Zip					
City,	ome w zip	r:1,			
954-336-5458			π ¥ ; 1 ′ t		
Daytime Telephone number					
dorothy ilong @pro com		17 N			
dorothyilong@me.com  E-mail address: (to be used for future annual report 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 co	NAME DIL Appraisals, In propration shall be:	c.	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	<del>_</del>	ress, if different is:
	1113 Avocado Isle		
F	Fort Lauderdale, FL 33315	<del></del>	
•			
ARTICLE III			
	which the corporation is organized is:		n impound to distribute the
	or any and all lawful business for coration Act of the State of Flori		e incorporated under the
General Corp	oration Act of the State of Flori	ua.	
ARTICLE IV The number of sha	SHARES res of stock is:100		
ARTICLE V	INITIAL OFFICERS AND/OR DIR	ECTORS	
	itle:Dorothy I. Long, President, Se		
Address:	1113 Avocado Isle	Address:	
	Fort Lauderdale, FL 33315		
Name and T	itle:	Name and Title:	
Address:		Address:	
		<del></del>	
		<del></del>	
Name and T	itle:	Name and Title:	
Address:			
		H 10 / 100 -	
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT accep	stable) of the registered agent is:	2012
Name:	Dorothy I. Long		77 (c) 17 (c) 17 (c) 18
Address:	1113 Avocado Isle		35 3 V
	Fort Lauderdale, FL 33315		
ADDICE BUILD	FARCODROD A WOR		(u) <sup>C.</sup>
	INCORPORATOR Iress of the Incorporator is:		
Name:	Dorothy I. Long		Service Control
Address:	1113 Avocado Isle		in to
	Fort Lauderdale, FL 33315		1.0
this costificate La	ed as registered agent to accept service o m familiar with and accept the appointme	nt as registered agent and agree to act	
1/01.1	Required Signature/Registered Ag		4/10/12 Date
	Required Signature/Registered Ag	gent	Date
I submit this docu	ment and affirm that the facts stated he epartment of State constitutes a third degr	rein are true. I am aware that the fa	
/\n	ester I ma		4/10/12
	Required Signature/Incorporate	or	Date