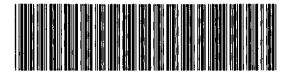
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(Requestor's Name)			
DEXTER ENNIS 4301 NW 120TH LANE SUNRISE, FL 33323			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			
Office Use Only			



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SECRETARY OF STATE
TALLAHASSEE FLODERY

T. Burch MAY . Z 2012



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FLORIDA DEPARTMENT OF STATESH OF GOAPOPATION **Division of Corporations**

April 12, 2012

DEXTER ENNIS 4301 NW 120TH LANE SUNRISE, FL 33323

SUBJECT: DEJAVU

Ref. Number: W12000020481

We have received your document for DEJAVU and your check(s) totaling \$87.50. 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.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

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) 245-6052.

Tim Burch Regulatory Specialist II

Letter Number: 312A00011628

Dejavu Investment Chances to: properties Inc.



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12 MAY -4 AH II: 17

FLORIDA DEPARTMENT OF STATE SEE HOHIDA Division of Corporations

April 25, 2012

DEXTER ENNIS 4301 NW 120TH LANE SUNRISE, FL 33323

SUBJECT: DEJAVU INVESTMENT PROPERTIES INC.

Ref. Number: W12000020481

We have received your document for DEJAVU INVESTMENT PROPERTIES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

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) 245-6052.

Tim Bürch Regulatory Specialist II New Filing Section

Letter Number: 912A00012697

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE 1 NAME Dejavu De (avu	Investment Properties In
ARTICLE II PRINCIPAL OFFICE Principal street address 4301 NW 120th Lane Sunrise, FL 33323	Mailing address, if different is:
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Assist with the purchase and sell of realestate ARTICLE IV SHARES The number of shares of stock is:	FILED 12 MAY -4 PH 4: 05 SECRETARY OF STATE TALLAHASSEE, FLORING
Name and Title: 1290 Em (CO) Address: 430 / W (20 / LMC) SURFIE F 32322	Name and Title:
Name and Title: MANIA SAINTUIL MAN Address: 430/ NU12010 Come SUNNISC F1 33322	Name and Title:
Name and Title:Address:	Name and Title:Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the Name: Address: 430 Null 120 (h Carve) Suncise F 33222	the registered agent is:
The name and address of the Incorporator is: Name: Address: Addre	
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as regis	tered agent and agree to act in this capacity
Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are to	Date rue. I am aware that the false information submitted in a
document to the Department of State constitutes a third degree felony. Required Signature/Incorporator	as provided for in s.817.155, F.S.