

(Requestor's Name)					
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(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

W1300038508



500249322905

07/01/13--01048--007 **70.00

COVER LETTER

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

SUBJECT: DIA - Stebo Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
Enclosed are an orig \$70.00 Filing Fee	inal and one (1) copy of the ar \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of			

FROM:	Karen Alston					
	Name (Printed or typed)					
	1177 Nikki View Dr					
_	Address					
Brandon, FL 33511						
7	City, State & Zip					
	813.643.4000					
-	Daytime Telephone number					
_	kalston@choicehr.com					
	E-mail address: (to be used for future annual report notification)					

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

13 JUL 22 PM 1: 30

SECRETARY OF STATE
DIVISION OF CORPORATIONS

RECEIVED
13 JUL 22 PM 1:50



PEPARTMENT OF STATE DIVISION OF CORPORADA Division of Corporations

July 8, 2013

KAREN ALSTON 1177 NIKKI VIEW DRIVE BRANDON, FL 33511

SUBJECT: DIA INC

Ref. Number: W13000038508

Land to DIA. Stubo

We have received your document for DIA INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is: DIA-FL, INC., document number J15476.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 713A00016647

13 JUL 22 PM 1: 30

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

RTICLE I NA	ME tion shall be	DIA-STEBO INC		SECRETARY OF STATE DIVISION OF CORPORATION
<i>rticle ii - pri</i> 177 Nikki Vie		DFFICE treet address		Mailing address, 3 chillere 22s: PH 1: 30
Brandon, FL				
RTICLE III PUR	PPOSE the corporat	ion is organized is: To ow	n and/or op	erate any lawful business
			·	· · · · · · · · · · · · · · · · · · ·
RTICLE IV SH.	4.RES 1	0		
ne number of shares of	stock is:			
ne number of shares of	stock is:	ICERS AND/OR DIRECTO		Steven Harper, VP
ne number of shares of RTICLE V INI Name and Titl	stock is: The st		Name and Title	Steven Harper, VP 1177 Nikki View Dr
ne number of shares of	TIAL OFF e. Robe 1177 Branc	rt Liess, President Nikki View Dr don, FL 33511	_ Name and Title _ Address:	
ne number of shares of RTICLE V INI Name and Titl Address	TIAL OFF Brance	rt Liess, President Nikki View Dr don, FL 33511	_ Name and Title _ Address: _	1177 Nikki View Dr
ne number of shares of RTICLE V INI Name and Titl Address	TIAL OFF e: Robe 1177 Brance	rt Liess, President Nikki View Dr don, FL 33511	Name and Title Address: Name and Title	1177 Nikki View Dr Brandon, FL 33511
RTICLE V INI Name and Title Address	TIAL OFF e: Robe 1177 Brance	rt Liess, President Nikki View Dr don, FL 33511	Name and Title Address: Name and Title	1177 Nikki View Dr Brandon, FL 33511
RTICLE V INI Name and Title Address Name and Title Address	TIAL OFF E. Robe 1177 Brance	rt Liess, President Nikki View Dr don, FL 33511	Name and Title Address: Name and Title Address:	1177 Nikki View Dr Brandon, FL 33511

Name and Title:		Name and Title:		
Addres	§S	Address:		
ARTICLE VI	REGISTERED AGENT			
The name and I	Florida street address (P.O. Box NOT acceptable) o	of the registered agent is:		
Name:	Robert Liess	_		
Address:	1177 Nikki View Dr	_		
	Brandon, FL 33511	<u>_</u>		
ARTICLE VII	INCORPORATOR			
The <u>name and a</u>	address of the Incorporator is:			
Name:	Robert Liess	_		
Address:	1177 Nikki View Dr			
	Brandon, FL 33511	_		
Having been na this certificate, I	nmed as registered agont to accept service of proces I am familiar with and accept the appointment as re	is for the above stated corporation at the place designated in gistered agent and agree to act in this capacity		
	Required Signature/Registered Agent	Date		
	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felo	true. I am aware that the false information submitted in a ny as provided for in s.817.155, F.S.		
	7	6/25/13		
	Required Signature/Incorporator	/ Data		

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