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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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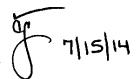
Office Use Only



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SECRETARY OF STATE TALLAMASSEE, FLOREDA



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

ARTICLE I N. The name of the corpo	AME Dration shall be:	ille, Inc	HPF	.		FIL	
ARTICLE II PI	RINCIPAL OFFICE				. 14	JUL 14	PM 4
1640 Dorset	Principal street address		Maili 1640 Do	ng address, if	differentis: TALL:	ETARY. HASSEI	OF STA
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Mount Dora,	FL 32/3/	-	Mount L	Dora, FL	32/5/		_
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ARTICLE III PU	IRPOSE th the corporation is organized is:						
• •	of the corporation is to c	conduct	anv lawf	ul busin	ess ac	tivities	_ S.
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ARTICLE IV SF	HARES of stock is:						
ARTICLE IV SP The number of shares of	HARES of stock is:						
The number of shares	of stock is: 100 IITIAL OFFICERS AND/OR DIRECT						
The number of shares	of stock is:	rors	and Title:				_
The number of shares	of stock is: 100 IITIAL OFFICERS AND/OR DIRECT	TORS Name a					_
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The number of shares of shares of shares of the share of the share and Ti	of stock is: 100 IITIAL OFFICERS AND/OR DIRECT itle: Jeffery Dille President, Secretary, Treasu	FORS Name a					- -
The number of shares of shares of shares of the share of the share and Ti	ITTIAL OFFICERS AND/OR DIRECT Itle: Jeffery Dille President, Secretary, Treasu 1640 Dorset Dr	FORS Name a					- - -
The number of shares of shares of shares of the number of shares of shares of the number of shares of	ITTIAL OFFICERS AND/OR DIRECT Itle: Jeffery Dille President, Secretary, Treasu 1640 Dorset Dr	Name a	ss:				- -
The number of shares of shares of shares of the number of shares of shares of the number of shares of	TITIAL OFFICERS AND/OR DIRECT Itle: Jeffery Dille President, Secretary, Treasu 1640 Dorset Dr Mount Dora, FL 32757	Name a ITET Addres Name a	and Title:				- - -
The number of shares of sh	International In	Name a IFEF Addres Name a Addres Addres	and Title:				- - -
ARTICLE V IN Name and Ti Address Name and Tit	TITIAL OFFICERS AND/OR DIRECT Itle: Jeffery Dille President, Secretary, Treasu 1640 Dorset Dr Mount Dora, FL 32757	Name a JICI Addres Name a Addres	and Title:				- - -
ARTICLE V IN Name and Ti Address Name and Tit	Intrial officers and/or direct itle: Jeffery Dille President, Secretary, Treasu 1640 Dorset Dr Mount Dora, FL 32757	Name a JICI Addres Name a Addres	and Title:				- - - -
Name and Tit Address	ITTIAL OFFICERS AND/OR DIRECT Itle: Jeffery Dille President, Secretary, Treasu 1640 Dorset Dr Mount Dora, FL 32757	Name a IFEF Addres Name a Addres Addres	and Title:				- - - -
Name and Tit Address Name and Tit Address	itle: HOU ITTIAL OFFICERS AND/OR DIRECT Itle: Jeffery Dille President, Secretary, Treasu 1640 Dorset Dr Mount Dora, FL 32757	Name a JIPET Addres Name a Addres Name a	and Title:				- - - -
Name and Tit Address	ITTIAL OFFICERS AND/OR DIRECT Itle: Jeffery Dille President, Secretary, Treasu 1640 Dorset Dr Mount Dora, FL 32757	Name a JIPET Addres Name a Addres Name a	and Title:				- - - -

Name and	Title:	Name and Title:	
Address		Address:	
			•
ARTICLE VI	REGISTERED AGENT		
The <u>name and Flo</u>	rida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Jeffery Dille		
Address:	1640 Dorset Dr	-	
	Mount Dora, FL 32757	-	
ARTICLE VII	INCORPORATOR		
The <u>name and add</u>	dress of the Incorporator is:		
Name:	Jeffery Dille		
Address:	1640 Dorset Dr	-	
	Mount Dora, FL 32757	_	
	ed as registered agent to accept service of process m familiar with and accept the appointment as reg		
1011	$\Omega'\Omega_{\alpha}$		7/12/14
8/8	Required Signature/Registered Agent	Brite	Date
I submit this docu	ment and affirm that the facts stated herein are	true. I am aware that the fals	se information submitted in a
	epartment of State constitutes a third degree felon	y as provided for in \$.817.155,	
Xflo	Required Signature/Incorporator		7/12/14 Date
Office	Required Signature/Incorporator		Direc
3e+	tery Dille		,
			SS =