## Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : DELANEY CORPORATE SERVICES

Account Number : I20140000112 : (800)717-2810 Phone Fax Number : (518)465-7883

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

## FLORIDA PROFIT/NON PROFIT CORPORATION Dila Inc.

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Division of Corporations

December 8, 2017

DELANEY

SUBJECT: DILA INC. REF: W17000097308

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted dogs not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is morely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section FAX Aud. #: B17000321055 Letter Number: 017A00024832

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

CERTS por	NCIDAL OFFICE		,
CLETT PRO	NCIPAL OFFICE Principal street address	· · Ma	iling address, if different is:
Michlar Drive		<del></del> _	
Worth, FL 3344	19	· <u>-:</u>	
CLETII PUR	POSE	<del></del>	<u> </u>
urpose for which	the corporation is organized is:	g training:	
	<del></del>		
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TE V INITE  Name and Tit  Address  Name and Title  Address	IAL OFFICERS AND/OR DIRECTO  ie: Michael Breitsprecher/President  5341 Michiar Drive  Lake Worth, FL 33449	Name and Title: Address:  Name and Title:	·

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Addres	s	Address:	- <del> </del>
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ABTICE OF	PCC/CTTP		
The name and F	REGISTERED AGENT Inridu street address (P.O. Box NOT acceptable)	of the registered against in-	• :
Name:	Michael Breitsprecher/President	of the registered agent is,	•
Address:	5341 Michlar Drive		
	Lake Worth, FL 33449	_	;
•		<del></del>	
ARTICLE VII	INCORPORATOR		
The name and no	Idress of the incorporator is:		. 1
Name:	Michael Breitsprecher/President		( )
Address:	5341 Michlar Drive	_	
	Laka Worth, FL 33449	<del>.</del>	<del>- 1</del>
:		<del>-</del>	
Effective date, if a	EFFECTIVE DATE: other than the date of filing:	(OPTIONAL	
(If an effective di filing.)	ate is listed, the date must be specific and comp	of be more than live days p	rior or 90 days after the
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ata.			:
	ed as registered agent to accept service of process in familiar with and accept the appointment as re	s for the above stated corpor	atton ut the place designated
rittenger Dietrible	cher L Brutnowsk	A	12/6/2017
	Required Signature/Registered Agent	· · · · · · · · · · · · · · · · · · ·	Date
l submit this doen document to the D	ment and affirm that the facts stated herein are epartment of State constitutes a third degree felo	true. I am aware that the for y as provided for in s.817:13	alse information submitted in 5, F.S.
Jel 1	Mal-		12/6/2017
C. Require	d Signature/Incorporator	<del>'-</del>	Date