

P96000043887

TRANSMITTAL LETTER

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

T000001825387
-05/16/96--01116--019
****131.25 ****131.25

SUBJECT: DAWN DISTRIBUTERS, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: Charles E. Fout
Name (printed or typed)

675 San Pablo Ave.
Address

Casselberry, FL 32707
City, State & Zip

407 - 830 - 1925
Daytime Telephone number

Charles GAVE
AUTHORIZATION BY PHONE TO
CORRECT Name in heading
DATE 5/22/96
DOC. EXAM. BK

FILED
96 MAY 16 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

696A 00025752

B. REGISTER MAY 23 1996

ARTICLES OF INCORPORATION
of
DAWN DISTRIBUTORS, INC.

FILED
96 MAY 16 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, Hereby Adopt(s) the following Articles of incorporation.

ARTICLE I - NAME

The name of this corporation shall be:

DAWN DISTRIBUTORS, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

675 San Pablo Ave.
Casselberry, FL 32707

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at one time is:

10,000 SHARES

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The Name and address of the initial registered agent is:

Charles E. Fout
675 San Pablo Ave.
Casselberry, FL 32707

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

**Charles E. Fout
675 San Pablo Ave.
Casselberry, FL 32707**

The undersigned Incorporator(s) has(have) executed these Articles of Incorporation this

13th day of march, 1996



Signature

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF THE SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: DAWN DISTRIBUTORS, INC.

675 San Pablo Ave.

Casselberry, FL 32707

2. The name and address of the registered agent and office is:


Charles E. Fout
(Name)

675 San Pablo Ave
(P. O. Box not acceptable)

Casselberry, FL 32707
(City/State/Zip)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature)

5/13/96
(Date)