

06-09-97 12:37PM

TO 619048802155

P002

P97000056188

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

000002225270--4

-06/27/97--01107--001

\*\*\*\*122.50 \*\*\*\*122.50

SUBJECT: DIXON SUPPLY, INC.  
(Proposed corporate name - must include suffix)

FILED  
97 JUN 25 AM 9:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Additional Copy Required

FROM: ROBERT DIXON  
Name (printed or typed)

10361 Lewana Dr.  
Address

Jacksonville, Fla 32257  
City, State & Zip

1-904-292-9512  
Daytime Telephone number

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

6/26/97

06-09-97 12:37PM

TO 619048802155

F003

FILED  
JUN 25 AM 9:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

*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 the corporation shall be:

**DIXON SUPPLY, INC.**

### ARTICLE II PRINCIPAL OFFICE

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

**P.O. Box 56456  
Jacksonville, Fla 32241-6456**

### ARTICLE III SHARES

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

**100 (one hundred)**

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**ROBERT A. DIXON  
10361 Lewana Dr.  
Jacksonville, Fla 32257**

FILING FEE: \$70.00

06-09-97 12:37PM

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**ARTICLE V INCORPORATOR(S)**

See instructions for officers/directors

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

**ROBERT A. DIXON**

**TERESA L. DIXON**

**10361 Lewana Dr.**

**Jacksonville, Fla 32257**

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

**23** day of **JUNE**, 19 **97** :

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: DIXON SUPPLY, INC.

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

ROBERT A. DIXON  
(NAME)

10361 Lewana Dr  
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Jacksonville, Fla 32257  
(CITY/STATE/ZIP)

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*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.*

Robert A. Dixon  
(SIGNATURE)

6-23-97  
(DATE)