

P97000088604

TRANSMITTAL LETTER

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

700002319127--6  
-10/13/97--01112--011  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: Defined Dimensions, Inc.  
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 70-.

FROM:

Don Hilbelink  
Name  
605 Crystal Grove Blvd  
Address  
Lutz FL 33549  
City, State, & Zip  
(813) 949-6442  
Telephone Number

FILED  
97 OCT 13 PM 1:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(4)

Note: Additional copy of articles is needed only when certified copy is requested.

J. Neenan OCT 14 1997

**ARTICLES OF INCORPORATION**

**OF**

**Defined Dimensions, Inc.**

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: **Defined Dimensions, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

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

**605 Crystal Grove Blvd  
Lutz FL 33549**

**ARTICLE III CAPITAL STOCK**

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

**500 Shares**

**ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is:

**Don R. Hilbelink  
605 Crystal Grove Blvd  
Lutz FL 33549**

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**ARTICLE V INCORPORATOR(S)**

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

Don R. Hilbelink  
605 Crystal Grove Blvd  
Lutz FL 33549

Amy J. Hilbelink  
605 Crystal Grove Blvd.  
Lutz FL 33549

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

1st day of October, 19 97.

x Don R. Hilbelink C.E.O.  
Signature/Title

x Amy J. Hilbelink President  
Signature/Title

\_\_\_\_\_  
Signature/Title

**CERTIFICATE OF DESIGNATION**  
**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: Defined Dimensions, Inc

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

Don R. Hilbelink  
(NAME)

605 Crystal Grove Blvd  
(P.O. BOX NOT ACCEPTABLE)

Lutz FL 33549  
(CITY/STATE/ZIP)

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SIGNATURE Don R. Hilbelink  
(corporate officer)

TITLE CEO.

DATE 10/1/97

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 Don R. Hilbelink

DATE 8/25/97