

Requestor's Name _____
Address _____
City/State/Zip _____ Phone # _____

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- | | | |
|----|--------------------|--------------|
| 1. | (Corporation Name) | (Document #) |
| 2. | (Corporation Name) | (Document #) |
| 3. | (Corporation Name) | (Document #) |
| 4. | (Corporation Name) | (Document #) |

☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of S

Certificate of Status

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

TECHNICAL ASSISTANT
TALLAHASSEE, FLORIDA

97 DEC 18 AM 8:20

[illegible]

12-a-a

Examiner's Initials

ARTICLES OF INCORPORATION

of

Dreamair, Inc.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Dreamair, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>Dreamair, Inc.</u>		
ADDRESS	<u>6522 Shadowbrook Dr. E.</u>		
CITY	<u>Lakeland</u>	FLORIDA	<u>33813</u> ZIP

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	<u>Roy A. Whorton</u>		
ADDRESS	<u>6522 Shadowbrook Dr. E</u>		
CITY	<u>Lakeland</u>	FLORIDA	<u>33813</u> ZIP

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>Roy A. Whorton</u>		
ADDRESS	<u>6522 Shadowbrook Dr. E</u>		
CITY	<u>Lakeland</u>	STATE	<u>FL.</u> ZIP <u>33813</u>
NAME	<u>Myrna Lombardi-Whorton</u>		
ADDRESS	<u>6522 Shadowbrook Dr. E.</u>		
CITY	<u>Lakeland</u>	STATE	<u>FL.</u> ZIP <u>33813</u>
NAME			
ADDRESS			
CITY		STATE	

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME ROY A. WHORTON		
ADDRESS 6522 SHADOW BROOK DR. E.		
CITY LAKE LAND	STATE FL	ZIP 33813
NAME MYRNA LOMBARDI- WHORTON		
ADDRESS 6522 SHADOW BROOK DR. E.		
CITY LAKE LAND	STATE FL	ZIP 33813
NAME		
ADDRESS		
CITY	STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 10 day of December, 1997.

Roy A. Whorton (Seal)
Myrna Lombardi-Whorton (Seal)
____ (Seal)

STATE OF FLORIDA)
COUNTY OF Polk) SS

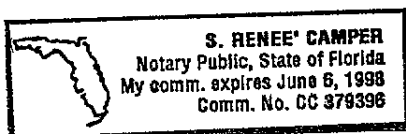
before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

<u>Roy A. Whorton</u> Signature	<u>FLORIDA DRIVERS Lic #</u> <u>W 635-721-56-096-0</u> Form of Identification
<u>Myrna Lombardi-Whorton</u> Signature	<u>W 516-559-47-960-0</u> Form of Identification

Signature Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that they executed these Articles of Incorporation, that I relied upon the form S of identification of the above named person S as indicated opposite each name, and that an oath (was)(was not) taken.

NOTARY RUBBER STAMP SEAL



Witness my hand and official seal in the County and State last aforesaid this 10 day of December, 1997.

S. Renee' Camper
Notary Signature
S. Renee' Camper
Printed Notary Signature

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

Dreamair, Inc.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 6522 Shadowbrook Dr. E.

Lakeland, Fl. 33813

has named Roy A. Whorton

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.

Roy A. Whorton

(registered agent)