P9.8000006749

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

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SUBJECT:	Direct (Abel (Proposed corpor	ate name - must include suf	tion, Inc.	
To does die en enteinele		of incompration and a	wheel for	
Enclosed is an original a	and one(1) copy of the articles	s or incorporation and a c	check for :	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
	:	ADDITIONAL CO	PY REQUIRED	
FROM:	Name (Pr	inted or typed)		
	300 Fran	adorson Ci	rde 5.100	
_	Apollo Bea	State & Zip	33572	
_	B \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	641 -950 elephone number	TALL SE 98	

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

F. CHESSER JAN 1 8 1998

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida
Business Corporation Act, hereby adopts the following Articles of Incorporation.

The name of the corporation shall be:
The name of the corporation shall be: Direct (Abel Distribution, Inc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
300 Frandoison Circle 5,100
Apollo Beach, Fl. 33572
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1000
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
Dole R. McKinzie
Cusking Fl 33570 ARTICLE V INCORPORATOR
ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
DALE R. McKinzie
710 7454, S.W. Lot 17
Ruskin, Fl. 33570
(1) 0 11 14/9X
Signature/Incorporator Date
(An additional article must be added if an effective date is requested.)
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-access 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 registifred agent
1/14/98
Signature/Registered Agent Date