P980000011455

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

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ORPO OLPHN SUBJECT: (Proposed corporate name - must include suffix)

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

Filing Fee	Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO)PY REQUIRED	
FROM:	LISA <u>S</u> BRA Name (Pr	NDES inted or typed)		•
_	3695 EAST	10th Court	- TALLA	
,	Hialeah f	TORINA 330	13 EB-3 AM	
_	305 830	0-0358 elephone number	RIATE RIATE	C

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

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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.
ARTICLE I NAME The name of the corporation shall be: DOLPHIN Management Corporation
<u>ARTICLE II</u> <u>PRINCIPAL OFFICE</u> The principal place of business and mailing address of this corporation shall be: 3675 EAST 10^{th} Court HIAleah, Floring 33013
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 Shares
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: LISA S. Brandes, Marking Hindlerh, Fl. 33013
ARTICLE V INCORPORATOR The <u>name and address</u> of the incorporator to these Articles of Incorporation are: LISA BRANDES, Mara Bur 3695 EAST 10th Court 14 Aleah, F/ 33013 MMM M
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 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 / /

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1/20/99 Date

Signature/Registered Agent