Department of State Division of Corporati P. O. Box 6327 Tallahassee, FL 3231	P9800	TAL LETTER	7	412
SUBJECT:	J.S. Dillon	Co., Inc.		
	(Proposed corpor	rate name - must include suff	ix)	<u> </u>
Enclosed is an origina	al and one(1) copy of the article		-10/ ***	26624259 13/9801036001 **87.50 *****87.50 r:
☐ \$70.00 Filing Fee	 \$78.75 Filing Fee & Certificate of Status 	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Ce Status	g Fee, fied Copy rtificate of
FROM:	J.S. Dillon Name (Printed or typed)			ASSI I
	P.O. Box 5017 Address		OF STATE FLORIDA	
	Tallabassee, Florida 32314-5017		222 9	
	City, State & Zip 1–800–JSDILLON Daytime Telephone number		RECEIVED 98 OCT 13 AN II: 198 OCT 13 AN II: 1960 OCT 13 AN II: 1960 OCT 13 AN II:	
Pmp/13/98				

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

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.

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

J.S. Dillon Co., Inc.

ARTICLE II PRINCIPAL OFFICE

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

Street Address: 1350 Mahan Drive, Suite 149, Tallahassee FL 32308-5101 Mailing Address: P.O. Box 5017, Tallahassee FL 32314-5017

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

J.S. Dillon 1350 Mahan Drive, Suite 149, Tallahassee FL 32308-5101

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

J.S. Dillon 1350 Mahan Drive, Suite 149, Tallahassee FL 32308-5101

Signature/Incorporator

10/13/1998

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

) Signature/Registered Agent

10/13/1998

FILED 98 OCT 13 AMII: 21

SECRETARY OF STATE

TALLAHASSEE, FLORIDA