P99000007250

January 14, 1999

Department of State, Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: DOERFLINGER ENTERPRISES INC

Ladies and Gentlemen:

Please find enclosed for filing one original and one copy of the Articles of Incorporation of Doerflinger Enterprises Inc. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely,

Amy Doerflinger 173 Holley St., Apopka, FL 32712

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ARTICLES OF INCORPORATION OF

DOERFLINGER ENTERPRISES INC

ARTICLE I

The name of the Corporation is Doerflinger Enterprises Inc.

ARTICLE II

The principal place of business and mailing address of this corporation shall be 173 Holley St., Apopka , FL 32712.

ARTICLE III

The aggregate number of shares which the Corporation has authority to issue is 1,000 shares of common stock with no par value.

ARTICLE IV

The address of the initial registered office of the Corporation is 173 Holley St., Apopka, Florida 32712, and the name of the Corporation's initial registered agent for service of process at such address is Amy Doerflinger.

ARTICLE V

The name and address of the incorporator to these Articles of Incorporation is: Amy Doerflinger, 173 Holley St., Apopka, FL 32712.

Amy Døerflinger

173 Holley St., Apopka, FL 32712

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

- *Pursuant to the provisions of sections 607.0501 or 617.0501, 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: Doerflinger Enterprises Inc.
- 2. The name of the registered agent and office is:

Amy Doerflinger 173 Holley St., Apopka , Florida 32712

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

DATE