TRANSMITTAL LETTER

799000016331

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

SUBJECT:	DGI Systems, Inc. (Proposed corporate name - must include suffix)	= ===	

Enclosed is all original and one(1) copy of the affects of file of portation and a choose 101.						
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\$70.00	\$78.75	□\$78.75	⊠ \$87.50			

Filing Fee Filing Fee & Certificate of Status

Filing Fee,
& Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Thomas Doughty Name (Printed or typed)		will-wai
3491-11 Thomasuille Rd Address	Suite 221	ω^{m}
Tollahassee FL 32308 City, State & Zip	}	
Paytime Telephone number	0000027 -02/19/ ******	7805308 /9901024028 37.50 ****87.50

DEPARTHENT OF STATE DIVISION OF CORPORATIONS TALL AHASSEE, FLORIDA

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

T. SMITH FEB 1 9 1999:

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: DGI Systems, Inc.

ARTICLE II PRINCIPAL <u>OFFICE</u>

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

3491-11 Thomasville 12d. Suite 221 Tallahassee, FL 32308

SHARES ARTICLE III

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

100

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

3491-11 Thomasuille Rd. Suite 221 Talkhassee, FL 373t Thomas Doughty

INCORPORATOR

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

Thomas Doughty 3491-11 Thomasuille Rd. Suite 221 Tallahassee, FL 32308

(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