

P99000034290

TRANSMITTAL LETTER

April 7, 1999

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

**SUBJECT:** Distribution Consulting Associates, Inc.  
(Proposed corporate name – must include suffix)

100002837141--6  
-04/12/99--01146--015  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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

X \$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate

\$122.50  
Filing Fee  
& Certified Copy

\$131.25  
Filing Fee  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

**FROM:** Clarence W. Eads  
160 Lakewood Village Circle  
Daytona Beach, Florida 32119-1492  
904 304-9457

99 APR 12 PM 2:38

FILED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

CB  
4/14/99  
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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:

Distribution Consulting Associates, Inc.

### ARTICLE II      PRINCIPAL OFFICE

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

160 Lakewood Village Circle  
Daytona Beach, Florida 32119-1492

### ARTICLE III      SHARES

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

One Thousand Shares (1000)

### ARTICLE IV      INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Clarence W. Eads  
160 Lakewood Village Circle  
Daytona Beach, Florida 32119-1492

### ARTICLE V      INCORPORATOR

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

Clarence W. Eads  
160 Lakewood Village Circle  
Daytona Beach, Florida 32119-1492

Clarence W. Eads  
Signature/Incorporator

April 8, 1999  
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*

Clarence W. Eads  
Signature/Registered Agent

April 8, 1999  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA