P44 880048815

(Proposed corporate name - must include suffix)

ESIGNED LETTERS

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

900002882679-1 -05/21/39-01085-015 *****87.50 * *****87.50

Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	a check for :	
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certificate copy of & Certificate of Status	FILED
FROM: JAMES J. SURA Name (Printed or typed) Results of the surface of typed)				
Jacksonville Honda 32246 City, State & Zip				
	904 99 Daytime To	24098 elephone number		Sura By PHONE
			CORRECT Ard	111

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

5/27

DOC. EXAM

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: DESIGNED LETTERS UNUMITED, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 2566 BEAUTY BERRY CIRCLE WEST TACKSONVILLE, FLORIDA 32246 The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10 Shares INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: USONVILLE INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: BEAUTH BERRY CIRCLEWEST THOUSONVILLE, FLORIDA 32246 (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 pegistered agent Signature Registered Agent