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TRANSMITTAL LETTER

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

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-07/12/99--01126--008
*****70.00 *****70.00

SUBJECT: D.M.F., INC.

Enclosed is an original and one (1) copy of the Articles of Incorporation and our check for \$70.00.

**FROM: DAVID M. FUQUA
1022 TROON DRIVE
NICEVILLE, FLORIDA 32578**

**FILED
99 JUL 12 AM 10:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**ARTICLES OF INCORPORATION
OF
D.M.F., INC.**

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:
D.M.F., INC.**

ARTICLE II: PRINCIPAL OFFICE

**The principal place of business and mailing address of this Corporation shall be:
1022 TROON DRIVE
NICEVILLE, FL 32578**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE III: SHARES

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

TWO HUNDRED FIFTY SHARES

ARTICLE IV: REGISTERED AGENT AND STREET ADDRESS

**The name and address of the initial registered agent are:
DAVID M. FUQUA
1022 TROON DRIVE
NICEVILLE, FLORIDA 32578**

ARTICLE V: INCORPORATOR

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

**DAVID M. FUQUA
1022 TROON DRIVE
NICEVILLE, FLORIDA 32578**

**The undersigned incorporator has executed these Articles of Incorporation this NINTH
(9TH) day of JULY, 1999**


DAVID M. FUQUA

**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/agent in the State of Florida:

1. The name of the Corporation is:

D.M.F., INC.

The name and address of the registered agent and office are:

DAVID M. FUQUA

1022 TROON DRIVE

NICEVILLE, FLORIDA 32578

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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.


DAVID M. FUQUA

July 10, 1999
DATE

99 JUL 12 AM 10:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED