TRANSMITTALLETTER

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

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SUBJECT:		D	&	D	=			Florida Inc.	
	(Proposed corporate name - must include suffix)								

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

D \$70.00 \$ \$78.75 Filing Fee Filing Fee & Certificate of Status

□\$78.75 □ \$87.50

Filing Fee Filing Fee,
& Certified Copy & Certificate of
Status

ADDITIONAL COPY REQUIRED.

FROM:	David H. Becker
	Name (Printed or typed)
	8600 NW South River Drive #249
	Address
	Miami, FL 33166
	City, State & Zip
	305-883-9505
	Daytime Telephone number

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

Original

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•		,,,,,,		PORATION	-

The understand incorporator for the	<u>.</u>
The undersigned incorporator, for the purpose of forming a corporation under the	Florida
Business Corporation Act, hereby adopts the following Articles of Incorporation	

FILED 99 AUG -4 PM 6:08 SECRETARY OF STATE

ARTICLE I NAME

The name of the corporation shall be:

D & D Enterprises of South Florida Inc.

. ARTICLE II PRINCIPAL OFFICE

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

8600 NW South River Drive #249 Miami, Fl 33166

ARTICLE III SHARES

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

10,000 (Ten Thousand)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

David H. Becker 8600 NW South River Drive #249

ARTICLE V 33106 ORPORATOR

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

David Becker 8600 NW South River Drive #249 Miami, Fl 33166

David J. Varrone 8600 NW South River Drive #249 Miami, FL 33166

Signatus Mucorporator

(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. Limither 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

Date-