TRANSMITTAL LETTER Department of State

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

SUBJECT: Dolphin Bay Distributors, Inc.
(Proposed corporate name - must include suffix)

600002961006

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

\$70.00 Filing Fee ₹378.75

Filing Fee

& Certificate

\$122.50

\$131.25

Filing Fee

Filing Fee.

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Gennaro Contaldo

Name (Printed or typed)

472 79th St S

Address

St Pete., Florida 33707

City, State & Zip

(727) - 344 - 0188

Daytime Telephone number

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

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:

Dolphin Bay Distributors Inc 472 79th St S St. Pete., Fl. 33707

PRINCIPAL OFFICE

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

Gennaro Contaldo 472 79th St S St Pete., Fl

SHARES ARTICLE III

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

1,000 shares

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Gennaro Contaldo 472 79th St S St Pete., Fl

INCORPORATOR 36-8933

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

Gennaro Contaldo 472 79th St S St Pete., Fl 33707

Signature/Incorporator

(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