7990 CEPTER 900

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

500003016755--0 -10/18/99--01077--019 *****79.00 ******78.75

JBJECT:	D.L. SAVAGE, (Proposed corp	INC. porate name - must include su	ffix)
nclosed is an origina	al and one(1) copy of the artic	les of incorporation and a	check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: _	Denita_L Savage Name (Printed or typed)		
	3217 College Street Address		
	(904)	1 32205 , State & Zip 387-0674 Telephone number	99 OCT 18 PM SECRETARY OF TALLAHASSEE, F
			4:59 STATE CORIDA

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

TICLES OF INCORPORATION

CC wine - compration under the Florida
The undersigned incorporator, for the purpose of forming a corporation under the Florida
The time of the following Articles of Incorporation.
Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

D.L. SAVAGE, INC.

PRINCIPAL OFFICE ARTICLE II

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

3217 College Street Jacksonville, F1 32205

SHARES ARTICLE III

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

(100) ONE HUNDRED

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Denita L. Savage 3217 College Street Jacksonville, F1 32205

INCORPORATOR ARTICLE V

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

Denita L. Savage 3217 College Street Jacksonville, Fl 32205

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