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TRANSMITTAL LETTER

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

SUBJECT:	DANUERS CON.	SULTATION AND	RESEACH FIRM, IN	
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
•				
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:	
☐ \$70.00 Filing Fee	∑ \$78.75 Filing Fee	□ \$78.75 Filing Fee	☐ \$87.50 Filing Fee,	
-	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of	
		Status ADDITIONAL COPY REQUIRED		
		<u> </u>		
FROM:	MIKE DANUE	RS		
	Name	(Printed or typed)		
	6130 WILES X			
		Address	No. of the Control of	
	CORAL SPAINAS FL	33067		
•	City,	State & Zip		
	754- 235- 8141	,		
•		elephone number		

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: CONSULTATION AND RESEARCH FIRM, INC DANUERS ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: WILES ROAD # 301 6130 CORAL SPRINGS, FL ARTICLE III PURPOSE The purpose for which the corporation is organized is: TO GIVE BUSINESS ADVICE TO CONSUMERS FOR CUSTOMERS. ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): MIKE DANUERS 6130 WICES RD. #301 CORAL SPRINGS, FL 33067 GENERAL MANAGER ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: WILES LU # 36/ 6130 33067 SPRINGS FL COLAL ARTICLE VII INCORPORATOR The name and address of the Incorporator is: MIKE DANVERS WILES RD. # 301 SPRINKS, FL ************************* Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator