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TRANSMITTAL LETTER

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

SUBJECT:	TOSEPH M. DEM	IMA, INC.	_
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCLI</u>	
□ \$70.00 Filing Fee	•	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	JOSEPH M. DEMMA Name (Printed or typed) 8800 NW 45 ST. Address		
-	CORAL SPRINGS, FL 33065 City, State & Zip		

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

ARTICLES OF INCORPORATIO		SECRETARY OF STATE ATTOM:
In compliance with Chapter 607 and/or Cha		MINIONE WATER STORE
ARTICLE I NAME The name of the corporation shall be:	JOSEPH M. DE	OSFEBII PH 3:58
ARTICLE II PRINCIPAL OFFICE	?	
The principal place of business/mailing addre	ess is: 8800 NV	v 45 ST.
	CORAL SPA	v 45 ST. eings, FL 33065
ARTICLE III PURPOSE The purpose for which the corporation is or	ganized is: LTFE, HE	EALTH & VARTAble ANNUET.
ARTICLE IV 100 SHARES ONE HU The number of shares of stock is: 1	INDRED SHARES [EALTH & VARIABLE THNNUET. (AGENT) FLOREDA LECENSE # E156571 AT THIS TEME).
,	AND/OR DIRECTORS S): JOSEPH M.	DEMMA DIRECTOR AGEN
ARTICLE VI REGISTERED ACTION The name and Florida street address (P.O.	Box NOT acceptable) of the Box NOT acceptable) of the Box NOT acceptable)	MMA
ARTICLE VII INCORPORATOR The name and address of the Incorporator is	JOSEPA MI VI	
**************************************	rvice of process for the above state	
Signature/Registered Agent To	WELL M. Dirag on A	02/05/05 Date 02/05/05
2 2	DELICE TO WEIGHT	
Signature/Incorporator	<u>-</u>	02/05/05
		Date
JOSEPH M. DEMMA		