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05 MAY 31 AM 7: 40 SECRETARY OF STATE TALLAHASSEF FLOPION

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TRANSMITTAL LETTER

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

SUBJECT:	MW DANISH INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDDISUTEIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	I 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 COPY REQUIRED	
FROM:	MICHAEL DANISH		
-	Name (Printed or typed)		
	1038 LEGENDS PATH DRIVE		
	Address		
	VALRICO, FL. 33594		
	City, State & Zip		
	813-230-0388		
	Daytime Telephone 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:

MW DANISH INC.

05 HAY 31 AM 7: 40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1038 LEGENDS PATH DRIVE

ARTICLE III VALREGSE L. 33594

The purpose for which the corporation is organized is:

FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MICHAEL DANISH --- PRES.

1038 LEGENDS PATH DRIVE VALRICO, FL. 33594

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

FRED SEIFTER

1707 OAK BRANCH CT

BRANDON, FL. 33511 RTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL DANISH

1038 LEGENDS PATH DRIVE

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

ignature/Registered/Agent

Signature/Incorporator

Date

Date