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COVER LETTER

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

SUBJECT: DOJAMIN N	. Denson	INC.		
(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an original and one (1) copy of the art	ticles of incorporation and	l a check for:		
□ \$70.00 □ \$78.75	\$78.75	\$87.50		
·	· ·	,		
Filing Fee Filing Fee	Filing Fee	Filing Fee,		
& Certificate of Status	& Certified Copy	Certified Copy		
		& Certificate of		
	ADDITIONAL CO	Status		
	ADDITIONAL CO	PT REQUIRED		
_				
	_			
FROM: Benjamin N	Densin			
FROM: DENDAMIN Nam	e (Printed or typed)			
- 11 -				
2772 NW 304 St.				
Address				
Brea RATON, FL 33434				
City, State & Zip				
\$1-573	-5378			
Daytime Telephone number				
OPPROVE COS	. Com			
E-mail address: (to be use	ed for future annual report	notification)		

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 7, 2010

BENJAMIN M. DENSON 2772 NW 30TH ST. BOCA RATON, FL 33434

RECEIVED APR 1 9 20 4

SUBJECT: BENJAMIN M. DENSON INC.

Ref. Number: W10000017033

We have received your document for BENJAMIN M. DENSON INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Christine Haney Senior Clerk New Filing Section

Letter Number: 910A00008486



COST CARANTE PARTICIPANTA CONTRA CONT

ATTICLES OF INCORPORATION	•
n compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the corporation shall be:	
Benjamin M. Denson INC.	
Delisore Inc.	•
ARTICLE II PRINCIPAL OFFICE	- . .
The principal street address and mailing address, if different is:	一般
2772 NW 30 H St.	章 豆
BOCA RATION, FC 33434	AR 19
ARTICLE III PURPOSE	Fig. 2 O
The number for which the compression is organized is:	المرئ فللتحب
Subchapter S status. ARTICLE IV SHARES	w w
2100 (190) 105 0 3 14402 1	
ARTICLE IV SHARES	
The number of shares of stock is:	-
100.	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	٠.**
Bearing 11 Deaces 2772 Mul 30th St.	
CARolyn I Denson Boca Ration, FL 33434	
Que de Seisse	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the r	registered agent is:
Bensamin M. Denson:	
2772 Nw 30m St.	
BOCARATON, FL 33+34	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Benjamin M. Denson 2772 NW 30th St.	
7 1 1 NW 301 St,	
BOCARATON FL 33434	****
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 a	
agree/to act in this capacity	,
(A_{4A})	(/2/.
Signature/Registered Agent	7/2/10
Signature Agent	Date
Denga 1/4 Ins	4/2/10
/ Signature/Incorporator	Date