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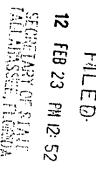
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

New Filing Section Division of Corporations P.-O. Box 6327 Tallahassee, FL 32314 SUBJECT: DANTECH CORP. (PROPOSED CORPORATE NAME - MUST INCL Enclosed are an original and one (1) copy of the articles of incorporation and a check for: ---\$70.00 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, --- & Certificate of-Status--- & Certified Copy - -Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

FROM: RONEN BENAYOU

Department of State

P.O. BOX 450224

Address

SUNRISE, FL 33345

City, State & Zip

(954) 805-6662

Daytime Telephone number

KSHALPERIN@AOL.COM

E-mail address: (to be used for future annual report notification)

Name (Printed or typed)

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 DANTECH CORP	A service of the serv
ARTICLE II PRINCIPAL OFFICE	FILES
Principal <u>street</u> address 1711 NW 99TH AVE PLANTATION, FL 33322	Mailing address, if different is: P.O. BOX 450212 FEB 23 PM 12: 52 SECRETARY
ADMICI E III DIVERGE	TAULARIS STOP STATE
ARTICLE III PURPOSE The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS	·····································
ARTICLE IV SHARES The number of shares of stock is:100 SHARES	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	
Name and Title: RONEN BENAYOUN Address: P.O. BOX 450224	Name and Title:Address:
SUNRISE, FL 33345	
PRESIDENT	
Name and Title: ORLY BENAYOUN	Name and Title:
Address: P.O. BOX 450224	Address:
SUNRISE, FL 33345 VICE PRESIDENT	
	<u> </u>
Name and Title:	Name and Title:
Address:	Address:
	
ADDIOLE III DEGROOPEDED ACRES	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name: RONEN BENAYOUN	
Address: 1711 NW 99TH AVE	
PLANTATION, FL 33322	<u></u>
ARTICLE VII INCORPORATOR	,
The name and address of the Incorporator is:	
Name: RONEN BENAYOUN	
Address: 1711 NW 99TH AVE	
PLANTATION, FL 33322	
Having been named as registered agent to accept service of pro- this certificate, I am familiar with and accept the appointment as	
Ro R	-7/18/2-12
Required Signature/Registered Agent	<u>02/18/2012</u> Date
I submit this document and affirm that the facts stated herein a document to the Department of State constitutes a third degree fel	ure true, 1 am aware that the jaise injormation submitted in a long as provided for in s.817.155. F.S.
K K	115/-10

Required Signature/Incorporator