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(Requestor's Name)

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(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

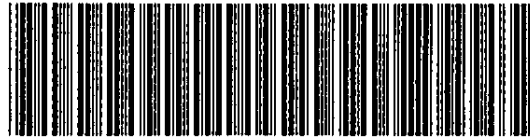
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2/15/13

## COVER LETTER

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

SUBJECT: **THE DANFOURTH CORPORATION**

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 H. ANAGNOS**

Name (Printed or typed)

**2315 SE 15TH PLACE**

Address

**CAPE CORAL, FLORIDA, 33990**

City, State & Zip

**(239) 271-6395**

Daytime Telephone number

**ANAGNOSMICHAEL@YAHOO.COM**

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

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**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)

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DIVISION OF CORPORATIONS

**ARTICLE I NAME**

The name of the corporation shall be:

THE DANFOURTH CORPORATION

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2315 SE 15TH PLACE

CAPE CORAL, FLORIDA, 33990

Mailing address, if different is:

P.O. BOX 152294

CAPE CORAL, FLORIDA 33990

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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO SEEK OUT AND SECURE INVESTMENT

OPPORTUNITIES IN VARIOUS VENUE'S, TO INCLUDE BUT NOT LIMITED TO,

REAL ESTATE, STOCKS, BONDS, PERSONAL PROPERTY, LIVESTOCK, MINERALS, OIL

OR WATER RIGHTS AND ANY OTHER LEGAL PROFITABLE INVESTMENTS AS SUCH.

THESE INVESTMENTS MAY BE DEVELOPED AND HELD FOR FUTURE CORPORATE

USE. OR SOLD, LEASED, TRADED OR BARTERED AS TO FURTHER CORPORATE INTERESTS.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: CLYDE ROBERT WILLIAMS, PRESIDENT

Name and Title: \_\_\_\_\_

Address 309 EAST PHILLIPS STREET

Address: \_\_\_\_\_

ONTARIO, CALIFORNIA, 91761

Name and Title: JESSICA ESCALERA, VICE PRESIDENT

Name and Title: \_\_\_\_\_

Address 5361 ALAMITOS STREET

Address: \_\_\_\_\_

ONTARIO, CALIFORNIA, 91763

Name and Title: MICHAEL H. ANAGNOS, TREASURER

Name and Title: \_\_\_\_\_

Address 2315 SE 15TH PLACE

Address: \_\_\_\_\_

CAPE CORAL, FLORIDA 33990

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: MICHAEL H. ANAGNOS  
Address: 2315 SE 15TH PLACE  
CAPE CORAL, FLORIDA, 33990

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MICHAEL H. ANAGNOS  
Address: 2315 SE 15TH PLACE  
CAPE CORAL, FLORIDA, 33990

*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*

*Michael H. Anagnos*  
\_\_\_\_\_  
Required Signature/Registered Agent

2/10/2013  
\_\_\_\_\_  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

*Michael H. Anagnos*  
\_\_\_\_\_  
Required Signature/Incorporator

2/10/2013  
\_\_\_\_\_  
Date