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(Re	questor's Name)	_
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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03/30/16--01015--012 **78.75



COVER LETTER

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

SUBJECT:	DNS WOLKEY ENTERORISE, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
	(PROPOSED CORPORAT	ΓΕ NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the arti	cles 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 CO	PY REQUIRED	
FROM:	Dal	e Walker		
rkow.	Name	(Printed or typed)		
	430	9 Kibler Ln	•	
-	A	ddress		
Holiday, Fl 34691 City, State & Zip				
	City, S	State & Zip		
	7 2 Daytime Te	7-204-1552 elephone number		
	E-mail address: (to be used	unikera hoti	mall com	
	L'illait audices, (in de useu	Tot refer eminat rebour	ionineanon)	

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporat	ion shall be: DN5	Walker B	-interpri-	ses. Inc.
LI304 K			•	ss, if different is:
ARTICLE III PURPO The purpose for which the	OSE ne corporation is organized is:	Home Rev Sub-Con		,
ARTICLE IV SHARE The number of shares of s	<u>S</u> stock is: <u>2000</u>			AEC SEC
ARTICLE V INITIA	LOFFICERS AND/OR DIRECT	TORS Pres V. P	T'A	METAN AHASS
	4309 Kibler L. Holiday, FL 3	∧ , Address:	Title:	SEC PH
Name and Title:				
Name and Title:		Name and	Title:	
		. <u></u>		

Name and	Citle:	Name and Title:	
Address		Address:	
		and the second s	
	EGISTERED AGENT ida street address (P.O. Box NOT acceptable) of	f the registered agent is:	
Name:	Dale Walker	-	
Address:	H309 Kibler LD.	_	
-	Holiday, FZ 34691		
ARTICLE VII IN	CORPORATOR		
The name and add	ress of the Incorporator is:	TA	· A
Name:	Dale Walker	SECR VLLA	5 5
Address:	4309 Kibler Ln.	- HAS	က ယ "
	Holiday, FL 3649	SET OF	D P
Effective date, if ot (If an effective date	FFECTIVE DATE: ther than the date of filing: 3/25/116 e is listed, the date must be specific and canno	(OPTIONAL) Solution of the more than five business days prior or 90	2:26
days after the filin	-		
	serted in this block does not meet the applicable ctive date on the Department of State's records.	statutory filing requirements, this date will not	be listed as
Having been name this certificate, I an	d as registered agent to accept service of process familiar with and accept the appointment as reg	s for the above stated corporation at the place d gistered agent and agree to act in this capacity	esignated in
(White	Required Signature/Registered Agent	3/25/1	<u>b</u>
I cubmit this down	nent and affirm that the facts stated herein are	tene I am aware that the falce information su	hmitted in a
	partment of State constitutes a third degree felon		
With &	Wilker	3/25//	16
Require	d Signature/Incorporator	/ /Dat	.e