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TRANSMITTAL LETTER

Department	of State
Division of	Corporations 327
P. O. Box 6:	32/
Tallahassee,	, FL 323 14

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		10 m			• • • • • • • • • • • • • • • • • • •
Enclosed is an origina	l and one (1) co	py of the articles	of incorporation	and a c	heck
for: \$70.00 Filling Fee	\$78.75 Filing Fee & Certificate	#122.50 Filing Fee & Certified Copy Additional Cop	#131.25 Filing Fee, Certified Copy & Certificate		
FROM:	Accounting Name	orinted or typed)	Inc	- 	SECRETAR DIVISION OF 1
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	Seminol	e, FL. 337 ry, State & Zip	77	rivim .	STATE ORATIONS 2: 43
	8/3-3	398-6011			. 5.
	Daytime	Telephone number			
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be

DANNY TIMKO INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

247 83RD AVENUE N. ST.PETERSBURG, FL.33702

ARTICLE III SHARES

The number(s) of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 SHARES NO PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Accounting & Tax Help, INC. 8668 PARK BLVD Suite .A SEMINOLE, Florida 33777

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

DANNY TIMKO 247 83RD AVENUE N. ST.PETERSBURG, FL.33702

The

undersigned incorpora	itor(s) has (have) executed t	hese Articles of Incorporation	n this
day of	March	, 19	
(An additional article	e must be added if an effecti	ve date is requested.)	
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A //m	Signature Signature		
	Signature	·	
	Signature	······································	

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

Notarization is not required

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

	DANNY TIMKO INC	
_		
2.	The name and address of the registered agent and office is:	
	Accounting & Tax Help, INC. (Name)	DIVISION OF CHART
	8668 PARK BLVD. Suite A (P.O. Box not acceptable)	ORFORATIONS PM 2: 43
	SEMINOLE, Florida 33777	+3

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registered agent.

(Cîty/State/Zîp)

Signature) DATE 3-16-98

PRESIDENT

1. The name of the corporation is: