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TRANSMITTAL LETTER

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

SUBJECT: WYSS BELL DELIVERY - MOVING INC.

(Proposed corporate name - must include suffix)

Enclosed is 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

2578.75

Filing Fee

& Certified Copy

□ \$87.50

Filing Fee,

Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

ROM: Kobat Dyon

Name (Printed or typed)

2901 W. Bosch B/vd#1005

Tempa Fla 53618 Eity, State & Zip

1-8/3-250-420S Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE 1 NAME

The name of the corporation shall be: WessBell Delivery & Moving, Inc.

ARTICLE 11 PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 6706 Preston Court Tampa, FL. 33615

ARTICLE 111 SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 50 Shares of common stock @ \$ 10.00 per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address: Robert Lyons

2901 W. BUSCH BLVD. SUITE # 1005 Tampa, FL. 33618

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of incorporation are: Alfredo Alberty
6706 Preston Court
Tampa, FL. 33615

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SECREINRY OF STATE
TALLAHASSEE, FLORIDA

(An additional article must be added if an affective date is requested)

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 status 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

Signature/Registered Agent

Date