

Division of Corporations

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## FLORIDA PROFIT/NON PROFIT CORPORATION WOLF RESTORATION, CORP.

Certificate of Status	0
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FILES SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) 13 AUG 12 AMII: 29

ARTICLE II PR	ration shall be: WOLF REST	ORATION, CORP.
6397 SW 9 MIAMI, FL	Principal <u>street</u> address TH STREET	Mailing address, if different is: 6397 SW 9TH STREE MIAMI, FL 33144
ARTICLE III PU. The purpose for which	RPOSE the corporation is organized is:	ND ALL LAWFUL BUSINESS
ARTICLE IV SH	ARES 100	
Name and Tit		DRS  Name and Title:
Address	MIAMI,FL 33144	Address:
	ə: <u> </u>	Name and Title:
Name and Title Address	e:	

		(conti.)
Name ar	nd Title:	Name and Title:
Address		
ARTICLE VI	REGISTERED AGENT  lorida street address (P.O. Box NOT acceptable) o	f the registered agent is:
Name:	ERIC WOLF	The registres agent is,
Address:	6397 SW 9TH STREET	-
Address,	MIAMI, FL 33144	_
ARTICLE VII	INCORPORATOR	
The name and ac	ddress of the Incorporator is:	
Name:	ERIC WOLF	
Address:	6397 SW 9TH STREET	-
( , , , , , , , , , , , , , , , , , , ,	MIAMI,FL 33144	- -
Having been nan	ned as registered agent to accept service of proces. am familiar with and accept the appointment as re	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity
Ci	Ch	8/12/13
	Required Signature/Registered Agent	Date
	sument and affirm that the facts stated herein are Department of State constitutes a third degree felor	true. I am aware that the false information submitted in the as provided for in \$.817.155. F.S.

Required Signature/Incorporator

SECHETARY OF STATE
JIVISION OF CORPORATION