

PO6000127389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

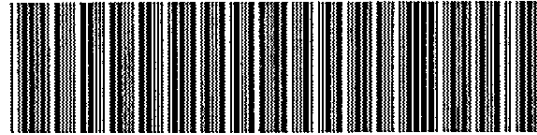
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/25/06--01036--001 **70.00

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2006 SEP 25 AM 10:14
CLERK OF DISTRICT COURT
STATE OF MONTANA

fa

COVER LETTER

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

SUBJECT: WELLS FARGO & CO. INC

(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: JUDE CABROUET
Name (Printed or typed)

PO BOX 8267
Address

TAMPA, FL 33604
City, State & Zip

(813)229-3278
Daytime Telephone number

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)

ARTICLE I NAME

The name of the corporation shall be:

WELLS FARGO & CO. INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

112 NORTH DELAWARE AVE SUITE A
TAMPA, FLORIDA, 33606

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SECURITY GUARD SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

2,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

COURT SERVICES INC
112 NORTH DELAWARE AVE SUITE A
TAMPA, FLORIDA, 33606
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

COURT SERVICES INC
112 NORTH DELAWARE AVE SUITE A
TAMPA, FLORIDA, 33606

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

COURT SERVICES INC
112 NORTH DELAWARE AVE SUITE A
TAMPA, FLORIDA, 33606

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

Judez Cabanet

Signature/Registered Agent

Judez Cabanet

Signature/Incorporator

9/23/2006

Date

9/23/2006

Date

FILED
2006 SEP 25 11:10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA