

# F95000002170

## TRANSMITTAL LETTER

**TO: QUALIFICATION/TAX LIEN SECTION  
DIVISION OF CORPORATIONS**

100001460411

-04/19/95--01073--004

\*\*\*\*\*78.75 \*\*\*\*\*78.75

**SUBJECT: WISE CHOICE SERVICE div OBLIO INC.**  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DAVID K. WISE

(Name of Person)

WISE CHOICE SERVICE div OBLIO INC.

(Firm/Company)

P.O. BOX 1647

(Address)

DESTIN, FLORIDA 32540-1647

(City, State and Zip Code)

Should you need to call someone concerning this matter, please call:

DAVID WISE

(Name of Person)

at ( 904 ) 837 - 1808

Area Code & Daytime Telephone Number

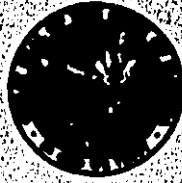
**COURIER ADDRESS:**

Qualification/Tax Lien Sec.  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Qualification/Tax Lien Sec.  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 MAY -3 AM 10:24  
3/5-24



**FLORIDA DEPARTMENT OF STATE**

**Sandra B. Mortham**  
Secretary of State

**April 20, 1995**

**DAVID K. WISE  
P.O. BOX 1647  
DESTIN, FL 32540-1647**

**SUBJECT: OBLIO CHARTER, INC.  
Ref. Number: W9500008474**

**We have received your document for OBLIO CHARTER, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):**

**The name listed in number one of the application must be identical to the name listed in the certificate of existence.**

**A post office box is not an acceptable address for the registered agent.**

**Please list the street address of each officer/director. If the officer/director does not have a street address, list the mailing address and write (N/A).**

**Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.**

**If you have any questions concerning the filing of your document, please call (904) 487-6958.**

**Lee Rivers  
Document Examiner**

**Letter Number: 995A00018593**

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE  
STATE OF FLORIDA:**

1. OBLIO CHARTER, INC.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. DELAWARE 3. 59-3308053  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4/2/79 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 4/17/95  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.155, F.S.))
7. P.O. BOX 1647  
DESTIN, FLORIDA 32540-1647  
(Current mailing address)
8. finish carpentry and cleaning  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:  
Name: KELLY WISE  
Office Address: 535 EIBERT ST.  
DESTIN, Florida, 32540  
(Zip Code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Kelly Wise  
(Registered agent's signature)

**11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
55  
JULY - 3 AM 10:24

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

B. OFFICERS

President: MARY JO WISE

Address: P.O. BOX 1647 N/A

DESTIN, FL. 32540-1647

Vice President: DAVID WISE

Address: P.O. BOX 1647 N/A

DESTIN, FL 32540-1647

Secretary: DAVID WISE

Address: P.O. BOX 1647 N/A

DESTIN, FL 32540-1647

Treasurer: DAVID WISE

Address: P.O. BOX 1647 N/A

DESTIN, FL 32540-1647

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.

  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

DAVID WISE

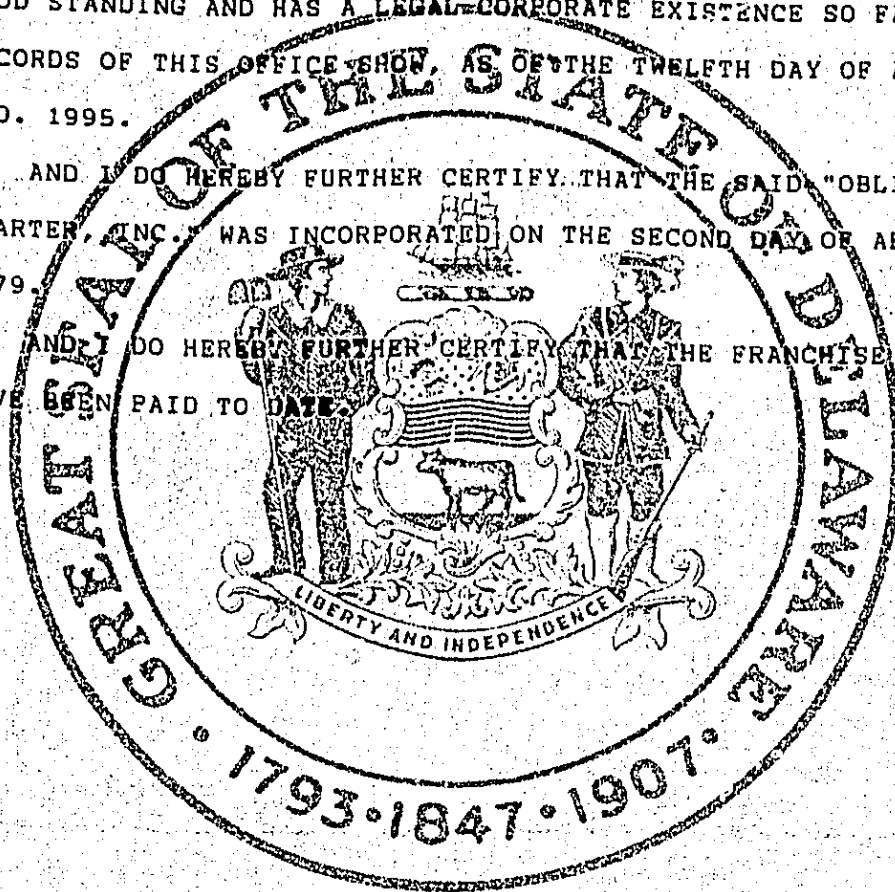
(Typed or printed name and capacity of person signing application)

**State of Delaware**  
**Office of the Secretary of State**

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OBLIO CHARTER, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF APRIL, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OBLIO CHARTER, INC." WAS INCORPORATED ON THE SECOND DAY OF APRIL, A.D. 1979.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 95 MAY -3 AM 10:24



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*Edward J. Freel*  
 Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

7470392

04-12-95