## N10000000736

(Ro	equestor's Name)	
(Ad	ddress)	<b>k</b>
(Ac	ddress)	
<i>(</i> C	ty/State/Zip/Phone	<u>, #)</u>
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PICK-UP	X WAIT	MAIL
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(Bi	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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TALL OFFICER OF THE

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SECRETARY OF SERVING ALEATHAS SEEL FLORI

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## **COVER LETTER**

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

SUBJECT:	Mashinaton 1	- LHEROUSES ENAME-MUST INCLU		
	(PROPOSEU CORPORAT	E NAME - <u>Must inclu</u>	DE SUFFIX)	
,				
Enclosed is an original	and one (1) copy of the Artic	eles 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	
		ADDITIONAL CO	PY REQUIRED	
FROM: LEVE AND WAShington Name (Printed or typed)				
2525 St. Marks St.				
Tallahassef FL. 32310  City, State & Zip				
850-544-39 (8) Daytime Telephone number				
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NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

## ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The state of the s	
The name of the corporation shall be:	
Washington Enterprises of M. FL, Inc.	
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if different is:	
2325 St Marks St Tall F1 32310	
ARTICLE III PURPOSE	源の Nigo E L
The purpose for which the corporation is organized is:	AN 25
Sceand Chance Commity Outleach Plogions	
	CF 40: 05
ARTICLE IV MANNER OF ELECTION	9. <b>19</b>
	Trail Of
appointed by Committee	
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS  List name(s), address(es) and specific title(s):  Pleveland Was Lington - P.	
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address (P.O. Box NOT acceptable) of the registered age.  Cloucland Ucslington  2325 S+ Malbs S+ Tall F1 323/0	nt is:
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:	
Cleveland Washington	
2325 Stmalls St Tall Fl 34510 ************************************	***
Having been named as registered agent to accept service of process for the above stated corporation in this certificate, I am familiar with and accept the appointment as registered agent and agree to a	n at the place designated
Signature/Registered Agent Date	10/10
Signature/Registered Agent Date  1/2	
Cleveland Washirt 1/2	5/10
Signature/Incorporator Date	