

00 JUL -7 AM 10: 24

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT: WII	VKELMAN roposed corporate n	NN ASSOCIATES, INCORPORATED.
Enclosed is an original for:  \$70.00  Filing Fee	l and one (1) co	\$122.50 \$131.25  Filing Fee Filing Fee, & Certified Copy & Certificate  Additional Copy Required
FROM:	Name	INKELMANN 800003316548—3 -07/07/0001075003 *****78.75 *****78.75  O N. WASHINGTON BLVD STE.300  Address
		TA FL. 34236 ity, State & Zip 492 - 48/6 e Telephone number

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

Bu 7 /11/20

## ARTICLES OF INCORPORATION

FILED

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business OF STATE Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

WINKELMANN ASSOCIATES INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

240 N. WASHINGTON BLUD SUITE 300 SARASOTA FL. 34236

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JUDY WINKELMANN 240 N Washington BND, # 300 SANASOTA, FL 3436

## ARTICLE V. INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JUDY WINKELMANN 240 N.WASHINGTON BLUD STE 300 SARASON FL 34236 ROY WINKELMANN 240 N.WASHINGTON BLUD. STE 300 SARASOTA FL34236

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this	
26 day of MAY ,#2000.	var v die ee
(An additional article must be added if an effective date is requested.)	
Signature Signature	
Signature Signature	
Signature	* enteres

## Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES THEY OF STATE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	WINKELMA	NN ASSO	<u>CIATES</u> INC	OKBKATE
2. The name and address of the regis	tered agent and office is:			
JUDY	WINKELMAN (NAME)	JN		. West in the
240 N	X OF MASHINGTON NOT ACCEP	BLVD - SU	ITE 300	
SARASC	CITY/STATE/ZIP)	236		ere jorgen

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 statutes 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.

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314