

TRANSMITTAL LETTER

P00000114831

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

800003495468--7  
-12/11/00--01127--022  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: WENCAR Enterprises, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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: Wendy Benedict  
Name (Printed or typed)

930 N.E. 205 street  
Address

Miami, FL. 33179  
City, State & Zip

305-409-9413  
Daytime Telephone number

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

00 DEC 11 PM 2:41  
FILED  
TALLAHASSEE, FLORIDA

# 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:

WENCAR Enterprises, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

930 N.E. 205 street  
Miami, Florida 33179

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail sales

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Wendy Benedict  
930 N.E. 205 St.  
Miami, FL. 33179

Carlos Suarez  
19477 N.E. 10th Avenue  
#209  
Miami, FL. 33179

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Wendy Benedict  
930 N.E. 205 St.  
Miami, FL. 33179

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Wendy Benedict  
930 N.E. 205 St.  
Miami, FL. 33179

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Signature/Registered Agent

12/7/00  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12/7/00  
\_\_\_\_\_  
Date

FILED  
00 DEC 11 PM 2:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA