POLOGODA 67

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

300003831693---8 -03/13/01--01004--005 ------70 75 +++++70 75

Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a	check for :			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Status	ee, d Copy ficate of		
FROM:	CAROL WHEE Name (Pr	rinted or typed)		-		
3403 W TACON ST #A Address Address						
	TAMPA FL City,	33629 State & Zip	· <u></u>	ARY SSE		
	813 - 361 - Z	56A elephone number	<u>.</u>	AM 8: 39 OF STAT E. FLORII	Ö	

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

9/3/15

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)					
ARTICLE I NAME The name of the corporation shall be:					
CAROL WHEELER, INC.	· · · · · · · · · · · · · · · · · · ·				
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3403 W TA CON ST #A TAMPA FL 33629 ARTICLE III PURPOSE The purpose for which the corporation is organized is: CONSULTING	AR 7 HASSE				
ARTICLE IV SHARES The number of shares of stock is: 10,000 Shares	AN 8:39 E. FLORIDA				
ARTICLE V INITIAL OFFICERS DIRECTORS (option The name(s) and address(es):	nal)				
CAROL WHEELER					
3403 W TACON ST#A TAMPA & 33629					
ARTICLE VI REGISTERED AGENT					
The <u>name and Florida street address</u> of the registered agent is:	and the second s				
3403 W TACON ST #A TAMPA FL 33629 ARTICLE VII INCORPORATOR					
The <u>name and address</u> of the Incorporator is:					
CAROL WHEELER					
3403 W THOON ST #A					

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I sim familiar with and accept the appointment as registered agent and agree to act in this capacity					
	2/21/01				
Signature/Registered Agent	Date				
	2/7/101				

Date

Signature/incorporator

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

3**0000383169**3—-8 -03/13/01--01004--005 ********

1 \$70.00	\$78.75	□ \$87.50
ling Fee Filing Fee	Filing Fee	Filing Fee,
& Certificate of Status	& Certified Copy	
		& Certificate of
	ADDITIONAL CO	Status OPV REQUIRED
000-, 121-		
FROM: CAROL WHE	e (Printed or typed)	
INCHIR	e (Finited of typed)	
3403 W T	ACON ST #	A -
	Address	ALL
	287.20	CRE
TAMPA FL	28/ 11/1	

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

8/3/15

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:	
CAROL WHEELER, INC.	·
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3403 W TA CON ST #A TAWPA FL 33629 ARTICLE III PURPOSE The purpose for which the corporation is organized is: CONSULTING ARTICLE IV SHARES The number of shares of stock is:	OI MAR 12 AM 8: 39 SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE V INITIAL OFFICERS DIRECTORS (optional)	A
The name(s) and address(es): CACOL WHEEVER 3403 W TACON ST#A TAMPA & 33629	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: CALO WHEELER 3403 W TALON ST # A TAWPA M 33629 ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is: CAROL WHEEVEL 3403 W TACON ST #A	
**************************************	place designated in this ity
Signature/Registered Agent Date	

Signature/Incorporator

<u>کیک</u> Date