

TRANSMITTAL LETTER

**P01000036961**

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

SUBJECT: GILBERT WACHSMAN CONSULTING INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200003972822--3  
-04/09/01--01113--004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: EVELYN WACHSMAN  
Name (Printed or typed)

5016 OAK BEND LANE  
Address

EDINA, MN 55436  
City, State & Zip

(952) 933-8680  
Daytime Telephone number

FILED  
01 APR -9 AM 8:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

T. Burch APR 12 2001

# 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:

GILBERT WACHSMAN CONSULTING INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6410 NORTH BAY ROAD  
MIAMI BEACH, FL 33141

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Perform consulting work for <sup>client</sup> companies.

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

EVELYN WACHSMAN  
5016 OAK BEND LANE  
EDINA, MN 55430

GILBERT WACHSMAN  
6410 NORTH BAY ROAD  
MIAMI BEACH, FL 33141

## ARTICLE VI REGISTERED AGENT

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

GILBERT WACHSMAN  
6410 NORTH BAY ROAD  
MIAMI BEACH, FL 33141


## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

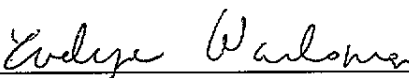
EVELYN WACHSMAN  
5016 OAK BEND LANE  
EDINA, MN 55430

\*\*\*\*\*

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

4/4/01  
Date

  
Signature/Incorporator

4/4/01  
Date

FILED  
01 APR -9 AM 8:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA