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TRANSMITTAL LETTER

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

SUBJECT:	Harold Wakeley III, P.A.			
50502011	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
	•			
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
and the single and th				
□ \$70	• 1	\$78.75	\$87.50	
Filing 1	——————————————————————————————————————	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
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		A DIDITTONAL CO	Status DV DEOLUMED	
ADDITIONAL COPY REQUIRED				
FROM: William A. Somers				
Name (Printed or typed)				
3465 Bonita Beach Road Unit #12 Address				
Bonita Springs, FL 34134 City, State & Zip				
City, batte & Etp				
(239) 947 - 1284				
Daytime Telephone number				

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

NAME ARTICLE I

The name of the corporation shall be:

Harold Wakeley III, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8060 North Cypress Drive

Fort Myers, FI 33912

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

General business purposes, including, but not limited to selling real estate.

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Debra Wakeley - President & Director

8060 North Cypress Drive

Fort Myers, Fl 33912

REGISTERED AGENT

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

William A. Somers

3465 Bonita Beach Road Unit 12

Bonita Springs, FL. 34133

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Harold Wakeley III

8060 North Cypress Drive

Fort Myers, FI 33912

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

Date