

PO3000078365

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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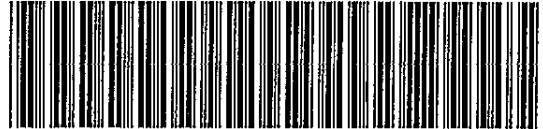
Traci GAVE

AUTHORIZATION BY PHONE TO

CORRECT articles

DATE 7/16/03

DOC. EXAM Dale White



700021420197

07/15/03--01006--005 **78.75

FILED
03 JUL 14 PM 6:31
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: St. Lucie Wireless, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Traci L Brinkmann

Name (Printed or typed)

568 Juniper Place

Address

Wellington, Fl. 33414

City, State & Zip

561-667-0393

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)

ARTICLE I NAME

The name of the corporation shall be:

St. Lucie Wireless, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

568 Juniper Place
Wellington, Fl. 33414

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To sell Verizon Wireless Phones and accessories

ARTICLE IV SHARES

The number of shares of stock is:

One

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Traci L Brinkmann - 568 Juniper Place, Wellington, Fl. 33414 - Owner

ARTICLE VI REGISTERED AGENT

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

Traci L Brinkmann - 568 Juniper Place, Wellington, Fl. 33414

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Traci L. Brinkmann - 568 Juniper Place, Wellington, Fl. 33414

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

07/07/03

Date


Signature Incorporator

07/07/03

Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA