P03000124303

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Wholesale Shoe Warehouse 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: Bill E Koonce
Name (Printed or typed)

927 University BLVD N
Address

Jacksonville FLA 32211
City, State & Zip

904-745-1033
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:

Wholesale Shoe Warehouse, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

929 University Blvd North
Jacksonville FL 32211

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THIS CORPORATION IS ORGANIZED FOR THE PURPOSE OF OF TRANSACTING ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Bill E. Koonce PRESIDENT
ERIN Koonce VICE PRESIDENT
8338 HOGAN RD
JACKSONVILLE FLA 32216

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ARTICLE VI REGISTERED AGENT

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

Bill E. Koonce
8338 HOGAN RD
JACKSONVILLE FLA 32216

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Bill E. Koonce
8338 HOGAN RD
JACKSONVILLE FLA 32216

****

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

Bill E Koonce — 10-15-03
Signature/Registered Agent — Date

Bill E Koonce — 10-15-03
Signature/Incorporator — Date