P04000003656

(Re	equestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





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11/21/03--01022--006 **78.75

04 JAN -5 PN 5: 32
SECRETARY OF STATE
TALLAHASSEF ELOPINA

3-36630 1-1-0-1

TRANSMITTAL LETTER

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

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:	
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: Wilner Delva Name (Printed or typed) 73 (a Doccori Mode Mice)				
Orlando Fl 32807 City, State & Zip				
407- 249-0890 Daytime Telephone number				

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 4, 2003

WILNER DELVA 736 DONQUIXOTE DR ORLANDO, FL 32807

SUBJECT: WILNE DELVA INC Ref. Number: W03000036630

We have received your document for WILNE DELVA INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

I CAN NOT READ THE CORPORATION NAME CLEARLY.,

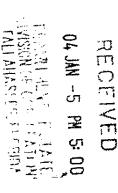
You must list at least one incorporator with a complete business street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6930.

Donna Graves
Document Specialist
New Filings Section

Letter Number: 003A00065389



ARTICLE I NAME	FILED
The name of the corporation shall be:	04 JAN -5 PM 5: 32
Wilner Delva Inc	CEODETARY OF STATE
ADGICLE II DRINGIRAL OFFICE	TALLAHASSEE, FLORIDA
The principal place of business/mailing address is: 736 Dongwi Xote Avx	
Orlando FL 32807	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
carpenty Constrution	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	•• .
wilner Delva Pres presidenti	
ARTICLE VI REGISTERED AGENT World The name and Florida street address of the registered agent is: Nicole Rene 736 Dongwise Auc Orlando FL 32607	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	. America
Milner Delva - Wiker Delva 736 Dong vixte Ave ************************************	ration at the place designated in this
Nosh There Signature Registered Agent	11-18-03 Date
with Dala - When Dala	11-18-22

Date

ARTICLES OF INCORPORATION

Signature/Incorporator

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