

PO40000037446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

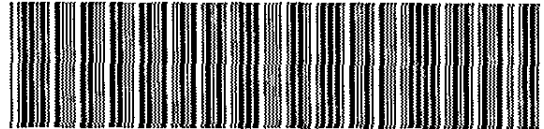
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/23/04--01086--002 **80.00

FILED
2004 FEB 23 PM 3:46
TALLAHASSEE FLORIDA

gf 2/27/04

TRANSMITTAL LETTER

2004 FEB 23 PM 3:46

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

DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

SUBJECT: KING-PIN WETS
(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:

THEODORE ESTLOW

Name (Printed or typed)

1160 North West 2nd AVE. #4

Address

Miami, Florida 33136-2750

City, State & Zip

(305) 374-9567

Daytime Telephone number

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

ARTICLES OF INCORPORATION

(Continued)

Article VI- Registered Agent

The name and address of the initial Registered Agent for (Company Name) is:

(Registered Agent Name)

(Registered Agent Address)

Theodore Estlow
print name

2-19-04
date

Theodore Estlow
signature 1160 NW 2ND AVE Apt 4
Miami FL 33136

Article VII- Incorporator

The name and address of each Incorporator is:

(Incorporator Name)

(Incorporator Address)

Theodore Estlow
print name

2-19-04
date

Theodore Estlow
signature 1160 NW 2ND AVE Apt 4
Miami FL 33136

BEFORE ME, the undersigned authority, on this 19 day of Feb, 2004, personally appeared Theodore Estlow. He/She is well personally known to me or has presented FL Driver License #E23480044-427 as identification. It was acknowledged to me that he/she signed the foregoing freely and voluntarily for the uses and purposes therein expressed.

WITNESS my hand and official seal the date aforesaid.

Zoraida Flores
name in print

Zoraida Flores
signature, NOTARY PUBLIC

Notary Public - State of Florida

My Commission Expires: 8/26/07



Zoraida Flores
My Commission DD244891
Expires August 26, 2007

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CLERK OF STATE
TALLAHASSEE FLORIDA