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TRANSMITTAL LETTER

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

SUBJECT: WEAL	TH PARTNERS INTERNATIONA	L, INC.	
	(PROPUSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Englaced are an original	ringland and (1) same of the out	ialos ofinosmonation and	la charle for
Enclosed are an only	ginal and one (1) copy of the art	icles of incorporation and	a cneck for:
\$70.00	□ \$78.75	\$78.75	2 \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
FDOM: CE	ECIL K. EVELYN		
TROM.	Name	(Printed or typed)	
	941 SUPERIOR STREET		
		Address	
	U.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O		
	JACKSONVILLE, FLORIDA 322	54 State & Zip	
	904/534-9363		
	Daytime 1	elephone 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:

WEALTH PARTNERS INTERNATIONAL, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 941 SUPERIOR STREET JACKSONVILLE, FLORIDA 32254

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Pursuant General Powers
F.S. 607.0302

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000 common shares @ \$1.00 par value each with pre-emptive rights

ARTICLE V __INITIAL OFFICERS AND/OR DIRECTORS

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

Cecil K. Evelyn, 941 Superior Street, Jacksonville, FL 32254, Incorporator/Director Charles K. Evelyn, 941 Superior Street, Jacksonville, FL 32254, Director

ARTICLE VI ____ REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Cecil K. Evelyn 941 Superior Street Jacksonville, FL 32254

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Cecil K. Evelyn 941 Superior Street Jacksonville, FL 32254

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

| Lie | Lie

Gignature/Incorndrator

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