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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

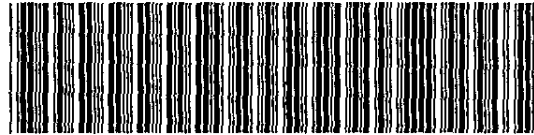
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

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

SUBJECT: W&D, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: W&D, INC.

Name (Printed or typed)

P.O. BOX 825

Address

HIGHLAND CITY, FL 33846

City, State & Zip

863-258-1690

Daytime Telephone number

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

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STATE  
OF FLORIDA  
JUL 14 1990

# 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:

Walt & Dee, Inc.  
HAYWARD

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. BOX 825  
HIGHLAND CITY, FL 33846

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PRIVATE PROVIDER FOR MEDICAID WAIVER HANICAPPED PERSON(S)  
THROUGH FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES.

## ARTICLE IV SHARES

The number of shares of stock is:

2 SHARES

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

WALTER E. HAYWARD - PRESIDENT  
DELORES D. HAYWARD- VICE-PRESIDENT  
P.O. BOX 825  
HIGHLAND CITY, FL 33846

## ARTICLE VI REGISTERED AGENT

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

DELORES D. HAYWARD  
4923 CELIA CIRCLE W.  
LAKELAND, FL 33813

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WALTER E. HAYWARD  
P.O. BOX 825  
HIGHLAND CITY, FL 33846

\*\*\*\*\*

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:

Deloris B. Hayward

Signature/Registered Agent

AUGUST 26, 2004

Date

Walter E. Hayward

Signature/Incorporator

AUGUST 26, 2004

Date

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AUGUST 21 PM 1:45