

P040000167824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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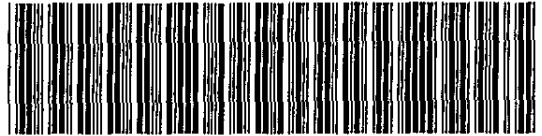
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/08/04--01041--001 *472.75

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04 DEC 14 AM 11:41
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12/15/04

TRANSMITTAL LETTER

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

SUBJECT: WM ENTERPRISES 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: TROYERS BUSINESS SERVICES INC

Name (Printed or typed)

1569 SHADOW RIDGE CIR

Address

SARASOTA FL 34240-9464

City, State & Zip

941-378-4171

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 9, 2004

TROYERS BUSINESS SERVICES INC
1569 SHAWDOW RIDGE CIR
SARASOTA, FL 34240-9464

SUBJECT: WM ENTERPRISES INC
Ref. Number: W04000045063

We have received your document for WM ENTERPRISES 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

An effective date may be added to the Articles of Incorporation **if a 2005 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

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) 245-6962.

Valerie Ingram
Document Specialist
New Filings Section

Letter Number: 904A00068943

ARTICLES OF INCORPORATION

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

FILED

04 DEC 14 AM 11:41

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

BILLMAR ENTERPRISES Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1569 SHADOW RIDGE CIR
SARASOTA FL 34240

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR THE PURPOSE OF TRANSACTING ANY OR ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is:

10,000 SHARES OF \$0.01 PAR VALUE COMMON STOCK.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

WILLIAM WEAVER
1569 SHADOW RIDGE CIR
SARASOTA FL 34240

ARTICLE VI REGISTERED AGENT

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

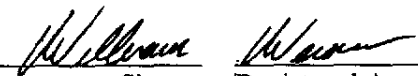
WILLIAM WEAVER
1569 SHADOW RIDGE CIR
SARASOTA FL 34240

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILLIAM WEAVER
1569 SHADOW RIDGE CIR
SARASOTA FL 34240

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



Signature/Registered Agent

12-06-04

Date



Signature/Incorporator

12-06-04

Date