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|---|
| (Requestor'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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| |

Office Use Only



700050357807

04/14/05--01034--003 **78.75

05 APR II. PM 2: EO

TRANSMITTAL LETTER

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

| SUBJECT: | ECT: The Wholesale Hut, Inc | | | | | |
|----------------------|--|--|---|------------------|-----|--|
| | | | | | | |
| Enclosed are an orig | inal and one (1) copy of the artic | les of incorporation and | a check for: | | | |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED | | | |
| FROM: | | E Sample Printed or typed) | | 3_ | ·*· | |
| | | | | | | |
| - | 454 Prestwick Ct Address | | | . v | | |
| - | Melbourne, FL 32940 City, State & Zip | | <u></u> | ٠, | | |
| _ | 407-760-4099 | | | - - , | | |
| • | Daytime To | lephone number | - | | | |

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

05 APR 14 PM 2: 5

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:

The Wholesale Hut, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 454 Prestwick Ct Melbourne, FL 32940

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Auto Wholesale Broker

ARTICLE IV SHARES

The number of shares of stock is:

Ten Thousand

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

William E. Sample 454 Prestwick Ct Melbourne, FL 32940

ARTICLE VI REGISTERED AGENT

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

William E. Sample 454 Prestwick Ct Melbourne, FL 32940

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

William E. Sample 454 Prestwick Ct Melboume, FL 32940

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

Date

Signature/Incorporator

Date