P05000107231

(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:				

Office Use Only



500057272145

08/01/05--01023--015 **78.75

SECTIVITY OF STATE

-0 2.7

TRANSMITTAL LETTER

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

SUBJECT: WHOLI	ESALE TOOL OUTLET INC. (PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles 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 PPY REQUIRED
FROM: AN	IDREW THOMAS MATURO		
		(Printed or typed)	· · · · · · · · · · · · · · · · · · ·
	PO BOX 18103		
		Address	
	SARASOTA, FL 34276	, State & Zip	·
	941-284-7162	Telephone number	· · · · · · · · · · · · · · · · · · ·
	Dayume	rerebuone 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)

FILED

05 AUG -1 PH 2:59

SECHETAHY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

WHOLESALE TOOL OUTLET INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: PO BOX 18103 SARASOTA FL, 34276

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO CONDUCT BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ANDREW THOMAS MATURO 5681-D SARAH AVENUE SARASOTA, FL 34233 PRESIDENT

ARTICLE VI REGISTERED AGENT

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

ANDREW THOMAS MATURO 5681-D SARAH AVENUE SARASOTA, FL 34233

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANDREW THOMAS MATURO 5681-D SARAH AVENUE SARASOTA, FL 34233

***********	**********
Having been named as registered agent to accept service of process fo certificate, I am familiar with and accept the appointment as registered	r the above stated corporation at the place designated in this agent and agree to act in this capacity
Am	7/21/05
Signature/Registered Agent	Date
Colm	7/21/05
Signature/Incorporator	Date