POSODO104587

(Requestor's Name)
(Requestor's Name)
3647 LETITIA LANE (Address)
TAUAHASSI (Address)
(Address)
TALLAHASSEE, FL 32312 (City/State/Zip/Phone #)
850-893-1668
PICK-UP WAIT MAIL
WILLIAM B. WILEY, P. A (Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1





800062179648

12/20/05--01026--013 **70.00

OS DEC 20 PH 12: 42
SECTETARY DISTAIL
ANASSEE, FLORIDA

TALL THAS EER SLORIDA

RECEIVED
05 DEC 20 PM 12: 24

e, of

The undersigned incorporator, for the purpose of forming a professional corporation under the Florida Business Corporation Act and the Professional Service Corporation and Limited Liability Act, hereby adopts the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be: William B. Wiley, P.A.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3647 Letitia Lane, Tallahassee, Florida 32312. The Board of Directors may, from time to time, move the principal office to any other address in the State of Florida.

<u>ARTICLE III – PURPOSE</u>

The purpose of the corporation is to engage in the activity of conducting a law office.

ARTICLE IV - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares of One Dollar (\$1.00) par value common stock.

ARTICLE V - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial Registered Agent are: William B. Wiley, 3647 Letitia Lane, Tallahassee, Florida 32312.

ARTICLE VI - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: William B. Wiley, 3647 Letitia Lane, Tallahassee, Florida 32312.

Signature/Incorporator

Date

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Signature/Registered Agent

Date