P06000049760

| (Re | equestor's Name) | | | |
|---|-------------------|-----------|--|--|
| (Ad | dress) | | | |
| (Ad | dress) | | | |
| (Cit | y/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | , | | |
| | | | | |
| | | | | |

Office Use Only



700069292547

C4/L5: 06--01087--034 **87.50

ALLARASSEE, FLORID

COVER LETTER

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

| SUBJECT: | WISMAR DRYWALL SERVICES INC. | | | |
|--------------------------|---|--|-------------------------|--|
| | (PROPOSED CORPORA | ATE NAME – <u>MUST INCL</u> | UDE SUFFIX) | |
| Enclosed are an original | ginal and one (1) copy of the art | icles of incorporation and | l a check for: | |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | & Certificate of Status | |
| FROM: | MARTA NIEVES Name (Printed or typed) | | | |
| | 1701 MABBETTE ST BUILDING 14 Apt 202 Address | | | |
| | | e , Fl 34741 , State & Zíp | | |
| | | 29-0248 | | |

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)

ARTICLE I

The name of the corporation shall be:

Wismar Drywall Services Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1701 Mabbette St Building 14 Apt 202 Kissimmee, FL 34741

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any Law Full Business

ARTICLE IV SHARES

The number of shares of stock is:

100

INITIAL OFFICERS AND/OR DIRECTORS

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

Martha Nieves

President

701 Mabbettee St

Building 14 Apt 202

Cesar Wislar

Vice- President

1701 Mabbette St

Building 14 Apt 202

Martha Nieves

1701 Mabbette St Building 14 Apt 202

Treasurer

Cesar Wislan

1701 Mabbette St Building 14 Apt 202

Secretary

ARTICLE VI REGISTERED AGENT

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

Nancy Villamil

3501 W. Vine Street Suite # 290

Kissimmee, FI 34741

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Martha Nieves

1701 Mabbette St Building 14 Apt 202

Kissimmee, Fl 34741

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/Incorporator