

PO6000058384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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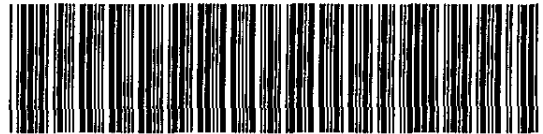
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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B. McKnight APR 25 2006

COVER LETTER

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

SUBJECT: WOLF COLLECTION CORP.

(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: PATRICIA WOLFF

Name (Printed or typed)

1630 SW 1st AVENUE # 8B

Address

MIAMI, FL. 33129

City, State & Zip

(305) 318-1763

Daytime Telephone 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)

ARTICLE I NAME

The name of the corporation shall be:

WOLF COLLECTION CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1630 SW 1st Avenue Suite 8-B, Miami FL 33129

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Auto Accessories Wholesaler

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INTIAL OFFICERS AND/OR DIRECTORS

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

Patricia Wolff - Owner/Director
1630 SW 1st Avenue Apt 8-B
Miami FL 33129

ARTICLE VI REGISTERED AGENT

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

Patricia Wolff
1630 SW 1st Avenue Apt 8-B
Miami FL 33129

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Patricia Wolff
1630 SW 1st Avenue Apt 8-B
Miami FL 33129

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

Patricia Wolff

Signature/Registered Agent

Patricia Wolff

Signature/Incorporator

04/18/2006

Date

04/18/2006

Date

06 APR 24 PM 1:29

SECRETARY OF STATE
DIVISION OF CORPORATION