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(Requestor's Name)				
(Address)				
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(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to F	iling Officer:			
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COVER LETTER

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

SUBJECT: Phil	Wright, Inc.		•		
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	rinal and one (1) copy of the artic	cles of incorporation and	a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED		
FROM: Irene Wright					
Name (Printed or typed)					
202 Hibiscus St					
Address Tarpon Springs, FL 34689 City, State & Zip					
	727-937-5677	elenhone 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

The name of the corporation shall be:

Phil Wright, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

202 Hibiscus Street

Tarpon Springs, FL 34689

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is formed for the purpose of transacting any and all lawful business for which corporations may be incorporated under the laws of Florida

ARTICLE IV SHARES

The number of shares of stock is:

The Corporation is authorized to issue 1000 shares of common stock, \$.0001 par value per share

INITIAL OFFICERS AND/OR DIRECTORS

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

Irene Wright President

202 Hibiscus St

Tarpon Springs, FI 34689

ARTICLE VI REGISTERED AGENT

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

Irene Wright

202 Hibiscus St

Tarpon Springs, FL 34689

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Irene Wright

202 Hibiscus St

Tarpon Springs, FL 34689

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 06/05/06

Signature/Incorporat

Signature/Registered Agent

Date

06/05/06

Date