

P06000086709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

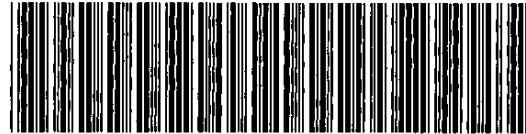
(Business Entity Name)

(Document Number)

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
06 JUN 27 AM 9:22

206-26870

**COVER LETTER**

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

SUBJECT: CAROL WAINWRIGHT INC  
(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: CAROL WAINWRIGHT  
Name (Printed or typed)

P.O. Box 5253  
Address

TITUSVILLE, FL 32783  
City, State & Zip

1-407-416-2607  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 12, 2006

*Correct as is*

CAROL WAINWRIGHT  
P.O. BOX 5253  
TITUSVILLE, FL 32783

SUBJECT: CAROL WAINWRIGHT INC.  
Ref. Number: W06000026870

We have received your document for CAROL WAINWRIGHT INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Doris Brown  
Document Specialist  
New Filing Section

Letter Number: 606A00040048

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06 JUN 27 AM 9:31

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

06 JUN 27 AM 9: 22

**ARTICLE I NAME**

The name of the corporation shall be:

Carol Mainwright INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

446 Riverview Ave.  
Sanford, FL 32771

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To Transact any and all lawful Business For  
which corporation smay be filed under the Florida  
General Corporations Act.

**ARTICLE IV SHARES**

The number of shares of stock is:

100 No Par Value

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Carol Mainwright - PST  
446 Riverview Ave.  
Sanford, FL 32771

**ARTICLE VI REGISTERED AGENT**

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

Carol Mainwright  
446 Riverview Ave.  
Sanford, FL 32771

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Carol Mainwright  
446 Riverview Ave.  
Sanford, FL 32771

\*\*\*\*\*

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

Carol Mainwright  
Signature/Registered Agent

6-01-06  
Date

Carol Mainwright  
Signature/Incorporator

6-01-06  
Date