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(Requestor's Name)

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(City/State/Zip/Phone #)

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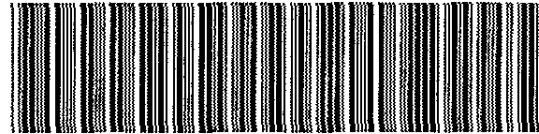
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CB 9-28-06

TRANSMITTAL LETTER

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

SUBJECT: Wind Blower Tours, Inc.
(Proposed corporate name - must include suffix)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee, Certified Copy
& Certificate of Status	& Certificate of Status	& Certificate of Status	& Certificate of Status

FROM: James Walker
Name (Printed or typed)

1930 NW 47 Ave
Address

Lauderhill, Florida 33313
City, State & Zip

954 -675-2820
Daytime Telephone number

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

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ARTICLES OF INCORPORATION

06 SEP 27 PM 2:21

of

Wind Blower Tours, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as incorporates of a corporation in compliance with Chapter 607 and / or Chapter 621, F.S. (Profit)

ARTICLES I

The names of the corporation shall be:

Wind Blower Tours, Inc.

ARTICLES 11

Principle business address:

1930 NW 47 Ave, Lauderhill, Fl. 33313

Mailing address: **Same**

ARTICLES III

The Purpose for which the corporation is organized is:

To provide safe quality service that exceeds our customers' diverse ground transportation needs. To provide efficient, affordable ground transportation service, with emphasizing safety as its highest priority.

ARTICLE IV

The number of shares of stock is:

1000

ARTICLE V

The initial board of directors shall consist of at least three (3) members. Who need not be residents of the State of Florida.

James Walker-President, Secretary, Treasurer

1930 NW 47 Ave

Lauderhill, Fl. 33313

 **President, Incorporator** Date 9/12/06

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607 0501 or 617 0501, Florida Statutes, the undersigned Corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida

1. The name of the corporation is

Wind Blower Tours, Inc

2. The name and address of the registered agent and office

James Walker

(NAME)

1930 NW 47 Ave

(Address)

(P O BOX NOT ACCEPTABLE)

Lauderhill, Florida 33313

(City, State & Zip)

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 the registered agent.

SIGNATURE

DATE

James Walker
9/19/06