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## **COVER LETTER**

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

SUBJECT:	ravie Wells fr	ruestigations	, Inc
·	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>ude suffix</u> )
S70.00 Filing Fee	ginal and one (1) copy of the arti \$78.75 Filing:Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Charine Wells = Name 8223 US HOUL	١	ons, Inc
	941 8120859	34219 State & Zip	1 1666

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: Tharlie Wells Investigations, Inc ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 223 USHWU 301 N 0 BUX 133 amishifl PURPOSE The purpose for which the corporation is organized is: Investigation 5 ARTICLE IV SHARES The number of shares of stock is: 1000 INITIAL OFFICERS AND/OR DIRECTORS Charles B Wells, President 11001-25 STE, PO BOX133 List name(s), address(es) and specific title(s): Parrish, FL 34219 REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Charles B. Wells 8223 USHWY301N Parrish, PL 34219 INCORPORATOR The name and address of the Incorporator is: Charles B. Wells 8223 US HWY 301N Parrish , FL 34219 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