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COVER LETTER

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

SUBJECT: WAG MAG, INC.	ORATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an original and one (1) copy of the	articles of incorporation and	d a check for:	
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	•
FROM: Jo-Ann Chebtous	ame (Printed or typed)	<u>_</u>	
5989 Seminol	E BLUB Address		
Seminole, FL 33	3772 City, State & Zip		
	7420 ne 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. (1)	Profit)	
ARTICLE I NAME The name of the corporation shall be:	_	
THE Wag Mag. INC.		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 5989 Seminous bush		
Seminoce, FL 33772		_
ARTICLE III PURPOSE		SEC ST
The purpose for which the corporation is organized is:	٠.	POT -
PUBLICATION		FILED # 9: 4.6 ALLAHASSEE, FLORID
ARTICLE IV SHARES		ST ST
The number of shares of stock is:		ATE ATE
ARTICLE V INITIAL OFFICERS AND/OR DIRECTION List name(s), address(es) and specific title(s): Jo-Ann Chelstowski, Frees 5989 Seminoue Blub Seminoue, FL 33772	ECTORS -	e
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acception of the Standard Seminole Blub Seminole, fl 33772	otable) of the registered ago	ent is:
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: JO-Ann Chelstouski 5989 SEMINOLE BLUD SEMINOLE, FL 33772	- · · ·	
******************	*******	*********
Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered a		
Signature/Registered Agent	<u>q</u>	liz 107 Date
to am Cheletaul		7/12/07
Signature/Incorporator		Date