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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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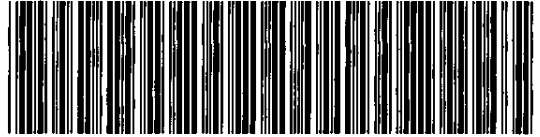
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12/26/07

## COVER LETTER

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

**SUBJECT:** WMS Consulting, 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:** John G. Mencke, P.A.

Name (Printed or typed)

818 A1A North, Suite 206

Address

Ponte Vedra Beach, FL 32082

City, State & Zip

(904) 280-5400

Daytime 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. (Profit)

## **ARTICLE I NAME**

The name of the corporation shall be:

WMS Consulting, Inc.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

133 Sea Island Drive

Ponte Vedra Beach, FL 32082

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Consulting, regarding import and export practices and other business activities

## **ARTICLE IV SHARES**

The number of shares of stock is:

100 shares

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

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

Walter M. Stys, President, Secretary

133 Sea Island Drive

Ponte Vedra Beach, FL 32082

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**ARTICLE VI REGISTERED AGENT**

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

John G. Mencke, CPA  
818 A1A N., Suite 206  
Ponte Vedra Beach, FL 32082

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

John G. Mencke, CPA  
818 A1A N., Suite 206  
Ponte Vedra Beach, FL 32082

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*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*

John G. Mencke  
Signature/Registered Agent

12/21/2007

Date

John G. Mencke  
Signature/Incorporator

12/21/2007

Date