

PO9000037837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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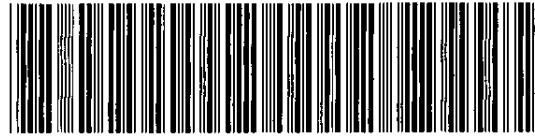
(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

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09 APR 28 AM 11:03
TALAHASSEE, FLORIDA

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09 APR 28 PM 12:03
SECRETARY OF STATE
TALAHASSEE, FLORIDA

4/29

Charter Number Only

VALIDATION ONLY

4/27

Requestor's Name

Address

City

State

ZIP

Phone

CORPORATION(S) NAME

W. Powers & Associates, INC.

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input checked="" type="checkbox"/> NonProfit | <input type="checkbox"/> Foreign | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reservation | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Walk In | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> Mail Out |
| <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up | |

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

**ARTICLES OF INCORPORATION
OF
W. POWERS & ASSOCIATES, INC.**

THE UNDERSIGNED incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

APPROVED
AND
FILED
09 APR 28 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME AND PRINCIPAL PLACE OF BUSINESS

The name of the Corporation shall be: W. Powers & Associates, Inc. The address of the principal office of this Corporation shall be: 16825 Patio Village Lane, Weston, FL 33326, and the mailing address of the Corporation shall be the same.

ARTICLE II - NATURE OF BUSINESS

This Corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory, or nation.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having \$1.00 par value per share.

ARTICLE IV - TERM OF EXISTENCE

This Corporation is to exist perpetually.

ARTICLE V - DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This Corporation shall have two Directors, initially. The names and addresses of the members of the Board of Directors are:

William Powers
Director

16825 Patio Village Lane
Weston, FL 33326-1614

Wilma Powers
Director

16825 Patio Village Lane
Weston, FL 33326-1614

ARTICLE VI - OFFICERS

The name and addresses of the initial officers of the corporation who shall hold office for the first year of the Corporation, or until their successors are elected or appointed are:

William Powers
President

16825 Patio Village Lane
Weston, FL 33326-1614

Wilma Powers
V. President, Sec
Treasurer

16825 Patio Village Lane
Weston, FL 33326-1614

ARTICLE VII - INCORPORATOR

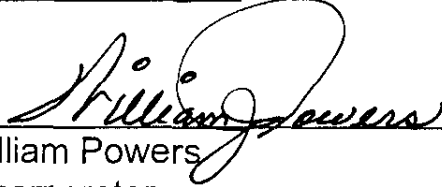
The name and street address of the incorporator to these Articles of Incorporation:

William Powers

16825 Patio Village Lane
Weston, FL 33326-1614

IN WITNESS WHEREOF, the undersigned has hereunto set their hand this _____ day of _____, 2009.

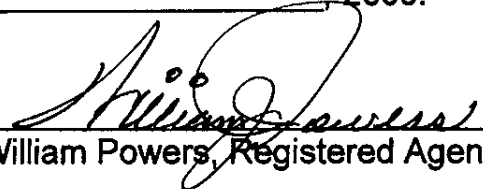
By


William Powers
Incorporator

ARTICLE VIII - REGISTERED AGENT AND ACCEPTANCE

W. Powers & Associates, Inc., first being duly organized as a For-Profit Corporation in the State of Florida, whose principal place of business shall be: 16825 Patio Village Lane, Weston, FL 33326 hereby appoints William Powers, as its Registered Agent, to accept process of service on its behalf at its principal place of business.

ACCEPTANCE: "I accept the appointment as Registered Agent for W. Powers & Associates, Inc., and agree to accept process of services on its behalf at the principal place of business. Done on this -
_____ day of _____ 2009.



William Powers, Registered Agent

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AND
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TALLAHASSEE, FLORIDA