

P09000045089

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



200148517842

04/06/09--01042--001 **78.75

APPROVED
AND
FILED
09 MAY 20 AM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

109-16256

COVER LETTER

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

SUBJECT: Wing Properties, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Rita Pickering
Name (Printed or typed)

4005 Woodside Dr.
Address

Coral Springs, FL 33605
City, State & Zip

954-345-9838
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 7, 2009

RITA PICKERING
4005 WOODSIDE DR
CORAL SPRINGS, FL 33605

SUBJECT: WING PROPERTIES, INC.
Ref. Number: W09000016256

We have received your document for WING PROPERTIES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 909A00011709

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:

~~Wing Properties, Inc.~~

White Wing Properties, Inc. *up*

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

~~4005 Woodside Dr., Coral Springs, FL 33065~~

10922 NW 49 Drive, Coral Springs, FL 33076 *up*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President

Rita Pickering,

~~4005 Woodside Dr.~~

Coral Springs, FL 33065

10922 NW 49 Dr. 33076 *up*

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ARTICLE VI REGISTERED AGENT

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

Rita Pickering

~~4005 Woodside Dr.,~~

Coral Springs, FL 33065

10922 NW 49 Dr. 33076 *up*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rita Pickering

~~4005 Woodside Dr.~~

Coral Springs, FL 33065

10922 NW 49 Dr. 33076 *up*

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

Rita G. Pickering

Signature/Registered Agent

3/25/09

Date

Rita G. Pickering

Signature/Incorporator

3/25/09

Date