

P100000092778

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

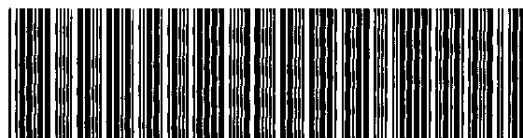
(Document Number)

Certified Copies _____

Certificates of Status _____

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Office Use Only



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10 NOV - 9 AM 10:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 11/15

COVER LETTER

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

SUBJECT: Wilson's Jewelers, 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: O.G. Wilson III
Name (Printed or typed)

11941 U.S. Hwy. 1
Address

North Palm Beach FL 33408
City, State & Zip

561-775-2022
Daytime Telephone number

wilson's jewelers@comcast.net
E-mail address: (to be used for future annual report notification)

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: Wilson's Jewelers, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

11941 U.S. Hwy 1
N.P.B. FL 33408

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to operate retail store

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: O.G. Wilson III President

Address: 1180 Gulfstream Way
Riviera Beach FL 33404

Name and Title: _____

Address: _____

Name and Title: Sandra Wilson Vice President

Address: 603 Commons Lane
P.B. G FL 33418

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

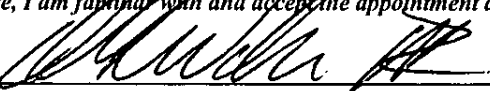
Name: O.G. Wilson III
Address: 11941 U.S. Hwy 1
N.P.B. FL 33408

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: O.G. Wilson III
Address: 11941 U.S. Hwy 1
N.P.B. FL 33404

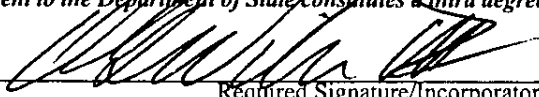
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

11/4/10
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

11/4/10
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA