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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
2/7

COVER LETTER

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

SUBJECT: WJL Development Group, 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: Caroline Bielas, Esq.

Name (Printed or typed)

522 North Main St., Ste. 100

Address

Milford, MI 48381

City, State & Zip

248-684-2400 Ext. 203

Daytime Telephone number

cbielas@sierragrouponline.com

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)

FILED

11 FEB -4 PM 1:22

ARTICLE I NAME WJL Development Group, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
124 North Street
Grafton, MA 01519

SECRETARY OF STATE
TALLAHASSEE FLORIDA
Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Any lawful purpose for which a corporation may be organized under the laws of the State of Florida.

ARTICLE IV SHARES
The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| | |
|---|-----------------------|
| Name and Title: <u>Walter J. Lee, Jr., Director</u> | Name and Title: _____ |
| Address: <u>13 Midland Ave.</u> | Address: _____ |
| <u>Nantucket, MA 02554</u> | _____ |

| | |
|---|-----------------------|
| Name and Title: <u>Joshua Lee, Director</u> | Name and Title: _____ |
| Address: <u>124 North Street</u> | Address: _____ |
| <u>Grafton, MA 01519</u> | _____ |

| | |
|-----------------------|-----------------------|
| Name and Title: _____ | Name and Title: _____ |
| Address: _____ | Address: _____ |
| _____ | _____ |

ARTICLE VI REGISTERED AGENT

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

Name: Kenneth Guard
Address: 8914 Bracken Way
Fort Myers, FL 33919

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joshua Lee
Address: 124 North Street
Grafton, MA 01519

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

K. Guard
Required Signature/Registered Agent

01-31-2014
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.

Joshua Lee
Required Signature/Incorporator

1/24/11
Date