

P 11000046649

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

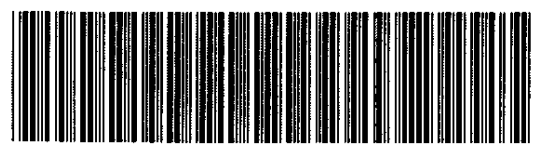
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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05/16/11--01043--023 \*\*87.50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 MAY 16 PM 2:10

APPROVAL  
FILED

SLH  
[Signature]

**COVER LETTER**

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

**SUBJECT:** 4 Winds Corp.  
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Danny Alvarez  
Name (Printed or typed)

525 NE 7th Ave  
Address

Delray Beach, FL 33483  
City, State & Zip

561-702-6537  
Daytime Telephone number

4WindsCorp@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**      4 Winds Corp  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address      Mailing address, if different is:  
525 NE 7th Ave      \_\_\_\_\_  
Delray Beach, Fl 33483      \_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
Any and all Lawful Business

**ARTICLE IV SHARES**  
The number of shares of stock is: 100

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

Name and Title: <u>Danny Alvarez president, vice president, secretary, treasurer</u>	Name and Title: _____
Address: <u>525 NE 7th Ave</u>	Address: _____
<u>Delray Beach, Fl 33483</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
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: Danny Alvarez  
Address: 525 NE 7th Ave  
Delray Beach, Fl 33483

**ARTICLE VII INCORPORATOR**  
The name and address of the Incorporator is:  
Name: Danny Alvarez  
Address: 525 NE 7th Ave  
Delray Beach, Fl 33483

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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FILE

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

Danny Alvarez      \_\_\_\_\_      5-11-11  
Required Signature/Registered Agent      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.

Danny Alvarez      \_\_\_\_\_      5-11-11  
Required Signature/Incorporator      Date