

P11000056191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

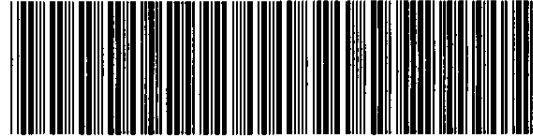
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000208396760

000208396760
06/07/11--01010--003 **70.00

W11-31268

RECEIVED
JUN 15 2011
FILING OFFICE
TALLAHASSEE, FLORIDA

FILED
JUN 15 PM 4:50

Atty. General JUN 16 2011

COVER LETTER

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

SUBJECT: Wegener Holdings 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: Peggi Wegener

Name (Printed or typed)

11569 Baskerville road

Address

Jacksonville, FL 32223

City, State & Zip

904-343-8511

Daytime Telephone number

pwegener@mccc.comcastbiz.net

E-mail address: (to be used for future annual report notification)

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



RECEIVED
11 JUN 15 AM 11:39

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 8, 2011

PEGGIE WEGENER
11569 BASKERVILLE ROAD
JACKSONVILLE, FL 32223

SUBJECT: WEGENER HOLDINGS, INC.
Ref. Number: W11000031268

We have received your document for WEGENER HOLDINGS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 811A00014035

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: **Wegener Holdings, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
11569 Baskerville Road
Jacksonville, FL 32223

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Real estate holdings

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Roy A. Wegener, Owner**
Address: **11569 Baskerville road**
Jacksonville, FL 32223

Name and Title: **Peggi S. Wegener, Director**
Address: **11569 Baskerville Road**
Jacksonville, FL 32223

Name and Title: _____
Address: _____

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:

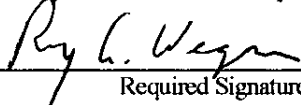
Name: **Roy A Wegener**
Address: **11569 Baskerville road**
Jacksonville, FL 32223

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Roy A Wegener**
Address: **11569 Baskerville Road**
Jacksonville, FL 32223

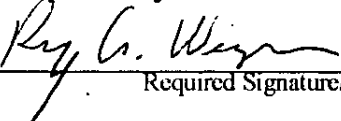
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

5/31/2011
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

5/31/2011
Date

FILED
JUN 15 PM 4:50
CLERK OF STATE
TALLAHASSEE, FLORIDA