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COVER LETTER

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

SUBJECT: Winsberg, Inc. (PROPOSED CORPORA			
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)	-
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:	
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
		y-4	
FROM: David Winsberg		ZUIT JUN 15	#1Montpag
PO Box 2815	(Printed or typed)	15 PM 2: 30	-
Lake City, PLZ		<u>ξ</u> . ω 	
386-755-7449 Daytime Te	elephone number		
david winsberg & E-mail address: (to be used	g mail.com 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	T144	
The name of the	corporation shall be: Wins berg,	T MC'	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Oo Mailing ad	dress, if different is:
	235 SW Peace Drive Lake City, FL 32024	- 10 10 0X	FL 32056
		<u> </u>	FL 32036
ARTICLE III	PURPOSE		
	which the corporation is organized is:		
The G	orporation will be provi	iding engineering se	rvices
1	state of Florida,	3	
In the	5 same at Floring,		
ADTICLE IV	CHADIC		
ARTICLE IV The number of sh	nares of stock is: 100		
APTICLE V	INITIAL OFFICERS AND/OR DIR	FCTYODS	
Name and	Title: David M. Wins berg , O.	WN ET LEOName and Title: 7911	ah Winsberg, LEU, V
Address:	PO Box 2818	Address: Po B	x 2815
	INITIAL OFFICERS AND/OR DIR Title: David M. Wins beng, Ov POBOX 2816 Lake City, PL 32056	<u> Lake (</u>	City, FL 32056
Name and Address:	Title:		
Address;			
Nome and	Title	Name and Title	
Address:	Title:		
rtaaress.		Tradicas.	
ARTICLE VI	REGISTERED AGENT		7
	lorida street address (P.O. Box NOT accep	otable) of the registered agent is:	
Name:	David M. Winsberg	<u>-</u>	
Address:	335 SW Peace Orive		\$
	Lake City, FL 32024		2
ARTICLE VII	INCORPORATOR		The state of the s
	ddress of the Incorporator is:		in
Name:	David M. Winsberg		<u> పే</u> : ట్ర
Address:	PO BOX 2 PIS Lake City, PL 32056	<u> </u>	New York
	med as registered agent to accept service of am familiar with and accept the appointmen	nt as registered agent and agree to act	
David 7	Required Signature/Registered Ag		6-10-2011
<u></u>	Required Signature/Registered Ag	enl	Date
	ument and affirm that the facts stated her Department of State constitutes a third degr	rein are true. I am aware that the fa	
, ,	1 .		~
sand	M. Windly Required Signature Incorporate		6-10-2011
	Required Signature/Incorporate	or	Date