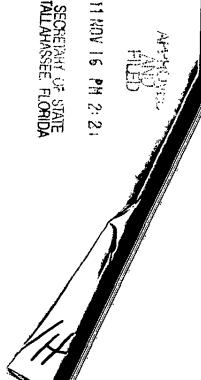
(Re	equestor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
(011	,y/O(212) 21p/: 1101/	,		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
,	omoss Endry Mar	110)		
(Document Number)				
(	,			
Certified Copies	ified Copies Certificates of Status			
	<u></u>	_		
Special Instructions to Filing Officer:				
		ŀ		
		1		
		ļ		
	<del> </del>			

Office Use Only



000214082400

11/16/11--01028--007 \*\*70.00



## **COVER LETTER**

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

SUBJECT: Waechter Wealth Mar	UBJECT: Waechter Wealth Management Inc				
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u> )				
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:				
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy & Certificate of Status				
	ADDITIONAL COPY REQUIRED				
FROM: Joseph Waechter Name	(Printed or typed)				
3711 River Hall Act D	ddress				
Jacksonville, FL 32217	7 State & Zip				
904-586-2807 Daytime Te	lephone number				
JoeWaechter4@aol.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)

The name of the c	waechter Wealth I corporation shall be:	vianagement inc	11 NOV 16 PM 2:21
ARTICLE II	PRINCIPAL OFFICE		SECRETARY OF STATE OF BUILDING ADDITIONS AND ADDITIONS OF STATE OF
	Principal street address	Mailir	ng additat lindinarent is: FI ORIDA
	3711 River Hall Rd DR.		
•	Jacksonville, FL 32217		
ARTICLE III			
The purpose for v	which the corporation is organized is:		
	the investments of individuals, retir investable assets and all other acti		
ARTICLE IV The number of shi	SHARES ares of stock is: 1000		
	INITIAL OFFICERS AND/OR DIRECT	rors	
	Title:Joseph Waechter, President	Name and Title:	
Address:	3711 River Hall Ad DR	Address:	<del></del>
	Jacksonville, FL 32217	<del></del>	· · · · · · · · · · · · · · · · · · ·
		<del></del>	
Name and T	Fitle:	Name and Title:	
Address:		Address:	
,			
			,
			<u>.</u>
Name and T	Citle:	Name and Title:	
Address:			
		<del></del> . <del></del>	
		<del></del> .	
	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptabl	e) of the registered agent is:	
Name:	Joseph Waechter		
Address:	3711 River Hall Ad DR		
	Jacksonville, FL 32217		
ARTICLE VII	INCORPORATOR		
	dress of the Incorporator is:		
Name:	Joseph Waechter	- <del></del>	
Address:	3711 River Hall Rd DR		
	Jacksonville, FL 32217		
Having been nam his certificate, I a	ned as registered agent to accept service of pr im familiar with and accept the appointment as	ocess for the above stated co registered agent and agree	prporation at the place designated in to act in this capacity
. Omar	h Warsh		11-14-11
07	Required Signature/Registered Agent		11-14-11 Date
I submit this doci	ument and affirm that the facts stated herein Department of State constitutes a third degree fo	are true. I am aware that t elony as provided for in s.81	the false information submitted in a 7.155, F.S.
Josep	Required Signature/Incorporator		1)-/4-1/ Date
	Required Signature/Incorporator		Date