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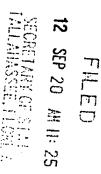
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## **COVER LETTER**

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

SUBJECT: HOBAN & WILKINS, IN	NC.	
(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	UDE SUFFIX
Enclosed are an original and one (1) copy of the arti	cles of incorporation an	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL CO	OPY REQUIRED
FROM: <u>Catherine Mulcahey, Esq</u> Name	e (Printed or typed)	
1665 Palm Beach Lakes	Blvd., #101 Address	
West Palm Beach, FL 3	3401 State & Zip	
561-729-0095  Daytime T	elephone number	
c.mulcahey@daveroylav E-mail address: (to be use	V.COM d for future annual report	notification)

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

## ARTICLES OF INCORPORATION

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
FILED

ARTICLE I NAME HOBAN & WILKINS, INC	. 12 550 20
The name of the corporation shall be:	12 SEP 20 AM 11: 25
ARTICLE II PRINCIPAL OFFICE	SECRETARY OF STAR
Principal street address 1015 19th Street	Mailing address, it different is:
West Palm Beach, FL 33407	4:
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
All lawful purposes	
ARTICLE IV SHARES	
The number of shares of stock is: 1000	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: Oliver Earl Wilkins, President	Name and Title:
Address: 1015 19th Street West Palm Beach, FL 33407	Address:
Name and Title: Seamus Hoban, Secretary/Treasurer	Name and Title
Address: 372 Prestwick Circle #4	
West Palm Beach, FL 33418	
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 name and Florida street address and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address and Florida str	the renistered agent is:
Name: Catherine Mulcahev, Esq.	the registered agent is.
Address: 1665 Palm Beach Lakes Blvd #10	<b>1</b>
West Palm Beach, FL 33401	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: Oliver Earl Wilkins	
Address: 1015 19th Street West Palm Beach, FL 33407	
West Failli Beaut, FL 33407	
Having been named as registered agent to accept service of process	
this certificate, I am familiar with and accept the appointment as regis	tered agent and agree to act in this capacity
Required Signature/Registered Agent	September 17, 2012
Required Signature/Registered Agent	Date
, , ,	<del></del>
I submit this document and affirm that the facts stated herein are the	rue. I am aware that the false information submitted in a
document to the Department of State constitutes a third degree felony	us provueu jor in 8.01/.155, F.S.
X/ ( W.W. )	September 17, 2012
Required Signature/Incorporator	Date