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P3 8/8/13

## **COVER LETTER**

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es of incorporation and	l a check for:	
□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
ADDITIONAL COPY REQUIRED		
	\$78.75 Filing Fee & Certified Copy	

FROM:	WILLIAM BRENT KNOWLTON
110111	Name (Printed or typed)
	1625 MONTIA CT
	Address
	PUNTA GORDA, FLORIDA 33950
	City, State & Zip
	(941) 889-8779
	Daytime Telephone number
	BK3210@HOTMAIL.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)

	in compliance with Chapter 607 and	•	ENGED
ARTICLE I NAM The name of the corporat	WHIRLER SPEAK	ERS, INC.	SECRETARY OF STATE DIVISION OF GORPORATIONS
ARTICLE II PRII	VCIPAL OFFICE Principal <u>street</u> address		13 AUG -5 PM 2: 36 dress, if different is:
1625 MONTIA		wanting doc	pess, il different is.
PUNTA GORI	DA, FLORIDA 33950	***************************************	
ARTICLE III PURI The purpose for which the SPEAKERS F	POSE ne corporation is organized is:  OR PROFESSIONAL MU	UFACTURE AND	RETAIL QUALITY
ARTICLE IV SHA	RES 400		
ARTICLE IV SHA The number of shares of	stock is:		
ARTICLE V INIT	TAL OFFICERS AND/OR DIRECTOR	s	
Name and Title	WILLIAM BRENT KNOWLTON, PRESIDENT	Name and Title:	
Address	1625 MONTIA CT	Address:	
	PUNTA GORDA, FLORIDA 33950		
Name and Title:		Name and Title	
Address			
Addless		Address.	
		-	
		-	
Name and Title:		Name and Title:	
Address		Address:	

FILED SECRETARY OF STATE DIVISION OF GORPORATIONS

Name an	d Title:	Name and Title:	13 AUG -5	PM 2: 36
Address		Address:		
	<del></del>	-		
		-		
ARTICLE VI	REGISTERED AGENT			
The name and Fl	orida street address (P.O. Box NOT acceptable) of	the registered age	nt is:	
Name:	WILLIAM BRENT KNOWLTON			
Address:	1625 MONTIA CT			
	PUNTA GORDA, FLORIDA 33950			
ARTICLE VII	INCORPORATOR			
The <u>name and ac</u>	Idress of the Incorporator is:			
Name:	WILLIAM BRENT KNOWLTON			
Address:	1625 MONTIA CT			
	PUNTA GORDA, FLORIDA 33950			
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg			is capacity
	any Then Mu			8/2/2413
	Required Signature/Registered Agent	`		Date
	ument and affirm that the facts stated herein are t Department of State constitutes a third degree felony			ormation submitted in a
	Required Signature/Incorporator	and the same of th		8/2/2013
	required orginature incorporator			Duc