

P140000086417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

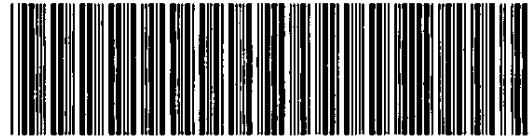
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000265523150

000265523150
10/20/14--01017--008 **87.50

RECEIVED
14 OCT 20 PM 12:24
CLERK OF STATE
TALLAHASSEE, FLORIDA

10/22/14 ch

COVER LETTER

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

SUBJECT: WENMAR CORPORATION
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
(WENMAR)

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: WENNY FEINBERG
Name (Printed or typed)

5704 NW. 48 AVENUE
Address

TAMARAC, FLA 33319
City, State & Zip

561.665.1118
Daytime Telephone number

WKRF1227@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)

ARTICLE I NAME

The name of the corporation shall be:

WENMAR CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5704 NW 48 AVENUE
TAMARAC, FLA. 33319

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DRAPERY'S + BLINDS

14 OCT 20 PM 12:24
STATE OF FLORIDA
TALLAHASSEE

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: WENDY FEINBERG

Name and Title: PRESIDENT

Address 5704 NW 48 AVE
TAMARAC, FLA.
33319

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(conti.)

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 registered agent is:

Name: WENDY FEINBERG

Address: 5704 NW 48 AVE.

TAMARAC, FLA. 33319

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Name: WENDY FEINBERG

Address: 5704 NW 48 AVE.

TAMARAC, FLA. 33319


14 OCT 20 PM 12:24
TAMARAC, FLA. 33319
DEPT. OF STATE
TAMARAC, FLA. 33319

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

10/13/14
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

10/13/14
Date