

Division of Corporations **Electronic Filing Cover Sheet** 

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(((H14000268582 3)))



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To:

Division of Corporations

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From:

Account Name : CORP USA Account Number : 072450003255 : (305)634-3694 Phone

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## FLORIDA PROFIT/NON PROFIT CORPORATION WILDSTEIN CONSULTING INC

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: WILDSTEIN CONSULTING INC

REF: W14000069731

November 20, 2014

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II FAX Aud. #: H14000268582 Letter Number: 314A00024577

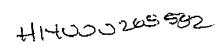
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P.O BOX 6327 - Taliahassee, Florida 32314

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SECRETARIST OF STATE
SECRETARIST ORIGINAL



## (m)

## ARTICLES OF INCORPORATION

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

ARTICLEI		
The nume of	the curporation shall be: Wildstein (	Consulting Inc
ARTICLE	I PRINCIPAL OFFICE	
Priz	ncipal street address	Mailing address, if different is:
	118th Street	
Pinecrest, F	PL, 33156	<del></del>
	III PURPOSE	
The purpose I	for which the corporation is organized is	: Consulting
	V SHARES	
The number of	of shares of stock is 100	
ARTICLE	V INITIAL OFFICERS AND/OR	DIRECTORS
	•	· · · · · · · · · · · · · · · · · · ·
	tle: Lawrence Wildstein, President	
Address	6080 S.W. 118th Street	
	Pinecrest, Florida 33156	
Name and Tit	de: Diane Wildstein, Secretary/Ti	reasurer
Address	6080 S.W. 118th Street	
	Pinecrest, Florida 33156	
		· · ·
ARTICLE	VI RECISTERED AGENT	•
The name on	d Fiorida street address (P.O. Box NO	T acceptable) of the registered agent is:
Name:	Carol L. Sokolow, C.P.A	A., P.A.
Address:	9500 S. Dadeland Boulevard,	<del></del>
	Miami, FL 33156	
4 P.W. C. F. I	(dr. tricoppos (son	
	VII INCORPORATOR ad address of the Incorporator is:	
Name:	Lawrence Wildstein	<del></del> `
Address:	6080 S.W. 118th Street Pinecrest, Florida 33156	<del></del>
	111111111111111111111111111111111111111	
Having been	named as registered agent to accept seri	vice of process for the above stated corporation at the place designated in this
errijicale. I e	um Jumusar with and accept the appoints	ment as registered agent and agree to act in this capacity
	Laure Sociola	11/18/14
	Required Signature/Registered A	lgent Date
l supmit this o	document and affirm that the facts stated	t herein are true. I am aware that the false information submitted in a document
to the Depart	ment of State constitutes a third degree f	felony as provided for in 8.817.155, F.S.
	Musera letastoni	11-18-14-
·	Required Signature/Incorporator	Date