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**Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : COMITER & SINGER, LLP
Account Number : I20000000085
Phone : (561) 626-4742
Fax Number : (561) 626-4742

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 MAY 29 AM 9:50

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: mfrid@comitersinger.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
WILDCAT INVESTMENTS, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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FLORIDA DEPARTMENT OF
CORPORATIONS
COMMERCIAL
SERVICES

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AFFIDAVIT

STATE OF FLORIDA
COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, personally appeared Richard B. Comiter who, being first duly sworn on oath, deposes and says:

1. I am the Authorized Representative of WILDCAT INVESTMENTS, LLC, a Florida limited liability company ("LLC").

2. Articles of Organization for LLC were filed on February 5, 2018 and assigned document number L18000032185.

3. A proposed Florida corporation intends to file Articles of Incorporation reflecting the name "WILDCAT INVESTMENTS, INC." ("INC.").

4. LLC consents to INC's using the name "WILDCAT INVESTMENTS, INC".

Further Affiant sayeth naught.

By: 

Richard B. Comiter, Authorized Representative of
WILDCAT INVESTMENTS, LLC

Date: as of May 29, 2018

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: WILDCAT INVESTMENTS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

400 CLEMATIS STREET, SUITE 201

WEST PALM BEACH, FL 33401

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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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: CORPORATE CREATIONS NETWORK, INC.
 Address: 11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RICHARD B. COMITER
 Address: 3801 POA BLVD., SUITE 604
PALM BEACH GARDENS, FL 33410

ARTICLE VIII EFFECTIVE DATE:


Effective date, if other than the date of filing: _____ (OPTIONAL)
 (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 further with and accept the appointment as registered agent and agree to act in this capacity

 Janice Irizarry, Special Secretary 5-29-18
 Required Signature/Registered Agent 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.

 5-29-2018
 Required Signature/Incorporator Date

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA