

PI80000657790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

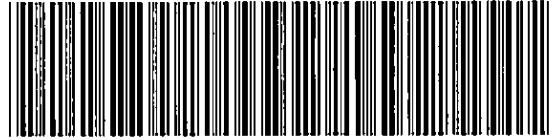
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SECRETARY OF STATE

FILED
2018 JUN 29 PM 3:02
SECRETARY OF STATE
ATTORNEY GENERAL

K. PAOR
JUN 29 2018

COVER LETTER

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

SUBJECT: Wildman Distributing
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: Dallas Taylor Wilde
Name (Printed or typed)

932 Redbush Ave
Address

Tallahassee FL 32303
City, State & Zip

850-212-7659
Daytime Telephone number

Wilde3ae@yahoo.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: Wildman Distributing Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

932 Redbud Ave.
Tallahassee, FL 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Dread Route Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dallas Wilder CEO Name and Title: _____

Address: 932 Redbud Ave Address: _____

Tallahassee, FL
32303

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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2008 JUN 29 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FL 32301

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: Dallas Wilder
Address: 932 Redbud Ave.
Tallahassee FL 32303

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dallas Wilder
Address: 932 Redbud Ave.
Tallahassee, FL 32303

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

Dallas Wilder

Required Signature/Registered Agent

6-29-18

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.

Dallas Wilder

Required Signature/Incorporator

6-29-18

Date