

P19000026424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

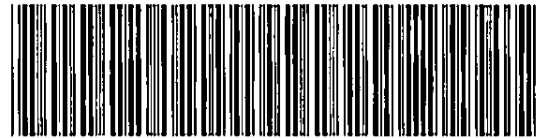
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

W19000027802
B 3/28/19



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OFFICE OF THE CLERK



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 21, 2019

JOSEPH B WIGGNS SR
91 BRANSCOMB ROAD, SUITE 17
GREEN COVE SPRINGS, FL 32043

SUBJECT: WCW HOLDINGS INC
Ref. Number: W19000027802

We have received your document for WCW HOLDINGS INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

A93000000142-W.C.W. HOLDINGS, LLLP.

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 619A00005606

COVER LETTER

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

SUBJECT: WCW HOLDINGS, INC.

(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: Joseph B. Wiggins, Sr.

Name (Printed or typed)

91 Branscomb Road, Suite 17

Address

Green Cove Springs, FL 32043

City, State & Zip

904 214 7999

Daytime Telephone number

joe@wigginslaw.net

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: WCW Holdings, Inc.

WCW Real Estate Holdings Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

91 Branscomb Road, Suite 17

Green Cove Springs, FL 32043

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joseph Bryant Wiggins, Jr

P.S.T

Name and Title: Timothy F. Crawford

U.P.

Address

91 Branscomb Road, Suite 17

Address:

91 Branscomb Road, Suite 17

Green Cove Springs, FL 32043

Green Cove Springs, FL 32043

Name and Title:

Joseph B. Wiggins Sr U.P.

Name and Title:

Address

91 Branscomb Rd #17

Address:

Green Cove Springs FL 32043

Name and Title:

Name and Title:

Address

Address:

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: Joseph B. Wiggins, Sr.
Address: 91 Branscomb Road, Suite 17
Green Cove Springs, FL 32043

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Joseph B. Wiggins, Sr.
Address: 91 Branscomb Road, Suite 17
Green Cove Springs, FL 32043

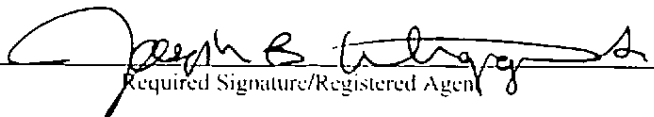
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 03/01/2019 (OPTIONAL)

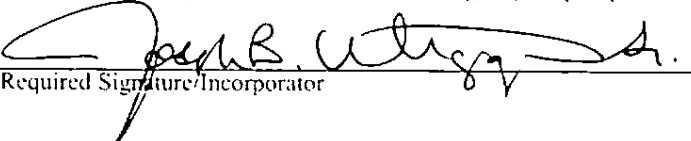
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 03/08/19
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.

 03/08/19
Required Signature/Incorporator Date