

P240000020172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

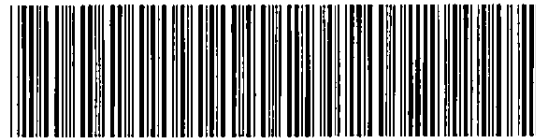
(Business Entity Name)

(Document Number)

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**COGENCYGLOBAL®**

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TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
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Account#: I20000000088  
If there are any issues  
please contact Patrice at  
850-202-9071

Date: 03/21/2024

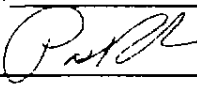
Name: Patrice Rush

Reference #: 2304393

Entity Name: WDG4, INC.

- ☒ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other \_\_\_\_\_

Authorized Amount: \$70.00

Signature: 

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TALLAHASSEE, FL

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① CORPORATE HQ  
COGENCY GLOBAL INC.  
10 E 40TH ST, 10TH FL  
NY, NY 10016  
D: +1.212.947.7200  
P: 800.221.0102  
F: 800.944.6607

② EUROPEAN HQ  
COGENCY GLOBAL (UK) LIMITED  
REGISTERED IN ENGLAND & WALES,  
REGISTRY #8010712  
6 LLOYDS AVE. UNIT 4CL  
LONDON EC3N 3AX  
+44 (0)20.3961.3080

③ ASIA PACIFIC HQ  
COGENCY GLOBAL (HK) LIMITED  
A HONG KONG LIMITED COMPANY  
UNIT B, 1/F, LIPPO LEIGHTON TOWER  
103 LEIGHTON RD, CAUSEWAY BAY  
HONG KONG  
P: +852.2682.9633  
F: +852.2682.9790



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Signature: 

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STATE OF FLORIDA  
TALLAHASSEE, FL

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## COVER LETTER

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

WDG4, Inc.

**SUBJECT:** \_\_\_\_\_  
(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status  
**ADDITIONAL COPY REQUIRED**

Mary E. Miles  
**FROM:** \_\_\_\_\_  
Name (Printed or typed)  
300 S. Wacker Dr. Ste 500  
\_\_\_\_\_  
Address  
Chicago, IL 60606  
\_\_\_\_\_  
City, State & Zip  
312-924-4263  
\_\_\_\_\_  
Daytime Telephone number  
mmiles@lawrencekaminlaw.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL

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**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: WDG4, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1865 Via Contessa

Winter Park, Fl 32789

Mailing address, if different is:

**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: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: William D. Grafton IV, President

Address: 1865 Via Contessa

Winter Park, Fl 32789

Name and Title: William D. Grafton IV, Director

Address: 1865 Via Contessa

Winter Park, Fl 32789

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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: \_\_\_\_\_ Cogency Global Inc.  
Address: \_\_\_\_\_ 115 North Calhoun Street, Suite 4  
\_\_\_\_\_ Tallahassee, FL 32301  
\_\_\_\_\_

**ARTICLE VII INCORPORATOR**

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

Name: \_\_\_\_\_ William D. Grafton IV  
Address: \_\_\_\_\_ 1865 Via Contessa  
\_\_\_\_\_ Winter Park, FL 32789  
\_\_\_\_\_

**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*

Anthony E. Mackay, V.P.  
Required Signature/Registered Agent

3/21/24  
Date  
22  
3/21/24  
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.*

h. a. [Signature]  
Required Signature/Incorporator