

# P95000015757

W.C.A.M., INC 1995  
820 N.E. 75T #2  
HALLANDALE  
FLORIDA 33009

300001398809  
-02/07/95--01026--008  
\*\*\*122.50 \*\*\*122.50

OFFICE USE ONLY

Herard Labrie GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Name on RA Cert

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known) DATE 2/27/95

- WCA M Inc 1995 (Corporation Name) BR (Document #) DOC. EXAM. BR
- \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- Walk in     Pick up time \_\_\_\_\_     Certified Copy
- Mail out     Will wait     Photocopy     Certificate of Status

FILED  
95 FEB 24 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

*corp. can't be  
its own incorporator*

B. REGISTER FEB 9 1995  
759,621,524,706,001  
W95-3062

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

February 9, 1995

W C A M, INC. 1995  
820 NE 7 ST #2  
HALLANDALE, FL 33009

SUBJECT: W C A M INC. 1995  
Ref. Number: W95000003063

We have received your document for W C A M INC. 1995 and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

**THE CORPORATION CANNOT BE ITS OWN INCORPORATOR.**

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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 (904) 487-6919.

Beth Register  
Corporate Specialist Supervisor

Letter Number: 495A00005836

DEAR SIR.

IF YOU HAVE NEED TO  
FIND ME IN THE DAY PLEASE  
CALL ME TO 305-923-4510

AND ASK FOR GERARD LABRIE

TANK YOU

Gerard Labrie

ARTICLES OF INCORPORATION

OF

W.C.A.M. INC. 1995

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

W.C.A.M. INC. 1995

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

W.C.A.M. INC. 1995  
820 N.E. 7<sup>th</sup> ST #2 HALLANDALE  
FLORIDA 33009

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 shares at \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JEAN-PAUL LAUZIER  
4900 N.W. 25<sup>th</sup> TERRACE  
TAMARAC FL. 33309

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

GERARD LABRIE  
820 N.E. 7 ST # 2

HALLANDALE FLORIDA  
33009

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24 day of JANUARY, 19 95.

Gerard Labrie  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Articles of Incorporation  
Filing Fee - \$35**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: W.C.A.M. INC. 1995

2. The name and address of the registered agent and office is:

JEAN-PAUL LAUZIER  
(Name)

4900 N.W. 25<sup>th</sup> TERRACE  
(P.O. Box not acceptable)

TAMARAC FL 33309  
(City/State/Zip)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

*Jean Paul Lauzier*  
(Signature)