

P96000031872

TRANSMITTAL LETTER

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

600001782516
-04/16/96--01108--006
*****78.75 *****78.75

SUBJECT: WOLFS HEAD BOOKS, INC.
(Proposed corporate name - must include suffix)

EFFECTIVE DATE

4-1-96

Enclosed is an original and one (1) copy of the articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: Barbara E. Nailor
Name (printed or typed)

PO Box 3705
Address

Saint Augustine, Fl 32085-3705
City, State & Zip

904-824-9357
Daytime Telephone number

96 APR -8 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Barbara Nailor GAVE
AUTHORIZATION BY PHONE TO
CORRECT RA address
DATE 4-10-96
DOC. EXAM AL

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED

96 APR -8 PM 4:44

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

EFFECTIVE DATE

4-1-96

The name of the corporation shall be:

WOLFS HEAD BOOKS, INC.

ARTICLE II PRINCIPAL OFFICE

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

3385 N COASTAL HWY #1
PO BOX 3705
SAINT AUGUSTINE, FL 32085-3705

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BARBARA E. NAILLER
3385 N. COASTAL HWY. #1
ST. AUGUSTINE, FL 32905-1775

See instructions for officers/directors

BARBARA E. NAILLER
HARVEY WOLF
3385 N COASTAL HWY #1
SAINT AUGUSTINE, FL 32905-1775

1st day of APRIL, 19 96.

ARTICLE VI EFFECTIVE DATE
WE REQUEST THE EFFECTIVE DATE OF APRIL 1, 1996 FOR THIS CORPORATION.

Barbara E. Charles
Signature


Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: WOLF'S HEAD BOOKS, INC.
2. The name and address of the registered agent and office is:

BARBARA E. NAILLER
(NAME)

3385 N COASTAL HWY #1
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

SAINT AUGUSTINE, FL 32905-1775
(CITY/STATE/ZIP)

FILED
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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.


(SIGNATURE)

4/5/96
(DATE)