P96000101373

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

Tailahassee, FL 32	314			
SUBJECT: Was	de_&_Associatos (Proposed corporate	namo – must includo s	-12/ ***	20284685 13/9601033004 *131.25 ****131.25
Enclosed is an origin	nal and one (1) cop	y of the articles of inc	orporation and a c	check
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	x \$131.25 Filing Fee, Certified Copy & Certificate	· · · · · · · · · · · · · · · · · · ·
Please return the pho	otocopy to me with	the filing date stampe	d on it.	M 8: 27
FROM:	Ronny L. Wade			P
	Name (printed or typed)			
	250 N. Wymore Rd.			
	Address		· · · · · · · · · · · · · · · · · · ·	
	<u>Winter Pa</u>	rk, FL 32789		
		City, State & Zip		•
	_(407) 539	(407) 539-1950		
	Daytime Te	Daytime Telephone Number		

DEC 171996 BB

Articles of Incorporation

i. The name of the corporation shall be:
Wade & Associates, Inc.
2. The principal place of business and mailing address of the corporation is:
250 N. Wymore Rd. Winter Park, FL 32789 3. The corporation shall have the authority to issue 509/1.00 ageh shares of stock.
4. The registered agent of the corporation is Ronny L. Wade and the registered street address is 250 N. Wymoro Rd. Winter Park, FL 32789. Florida 32789
5. The initial Board of Directors shall have _1_ member(s) whose name(s) and address(es) is/are as follows: _Ronny L. Wade
The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.
6. The incorporator of this corporation is <u>Ronny L. Wade</u> whose street address is 250 N. Wymore Rd. Winter Park, FL 32789
Dated 12/9/96 Tonsey Mask Incorporator
Having been named as registered agent and to accept service of process for the above stated

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 am familiar with and accept the obligations of my position as registered agent.

Dated <u>12/9/96</u>

Registered Agent

SHARON D SOMNER My Commission CC313827 Expires Sep. 08, 1997 Bonded by HAI 800-422-1558

Show Q. Sommer Expires Slpt. 8,1997 DL #W300.732-67.362-0