P96090101373

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

| SUBJECT: <u>Wade & Associates, Inc.</u> (Proposed corporate name – must include suffix) | 8000020284685 -12/13/9601033084 *****131.25 *****131.25 |
|---|---|
| Enclosed is an original and one (1) copy of the articles of incorpor | ration and a check |

| Enclosed is an original and | one (1) copy of | i the articles of | incorporation | and a | check |
|-----------------------------|-----------------|-------------------|---------------|-------|-------|
| for: | (, . , | | | | |

- \$70.00 Filing Fee
- \$78.75

Filing Fee

& Certificate

- **\$122.50**
- Filing Fee & Certified Copy
- x \$131.25
- Filing Fee, Certified Copy & Certificate

Please return the photocopy to me with the filing date stamped on it.

SECRITASSEE FLORIDA

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| г. | п | u | M | 1 |

Ronny L. Wade

Name (printed or typed)

250 N. Wymore Rd.

Address

Winter Park, FL 32789
City, State & Zip

only, clate a z

(407) 539-1950

Daytime Telephone Number

DEC 171996 135B

Articles of Incorporation

1. 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 500/1,00; each shares of stock. 4. The registered agent of the corporation is Ronny L. Wade registered street address is 250 N. Wymore Rd. Winter Park, Ft. 32789 Florida 32789 5. The initial Board of Directors shall have <u>1</u> member(s) whose name(s) and address(es) is/are as follows: Ronny L. Wade 250 N. Wymore Rd., Winter Park Florida 32789 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 _____ Ronny L. Wade____ whose street addressis 250 N. Wymore Rd. Winter Park, FL 32789 Dated 12/9/96

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>D/9/96</u>

SHARON D SOMNER My Commission CC313827 Expires Sop. 08, 1997 Bonded by HAI

Shown Q. Sommer Expires. Slpt. 8,1997 DL # W300.732-67.362.U