

P97000011921

TRANSMITTAL LETTER

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

100002062501--7
-01/17/97--01110--015
*****78.75 *****78.75

SUBJECT: WOLFGANG, INC.
(Proposed corporate name - must include suffix)

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

FILED
97 FEB - 6 PM 4: 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM: MARYLU CZULEWICZ
Name (printed or typed)

5809 LAUDER ST.
Address

FT. MYERS BCH. FL. 33931
City, State & Zip

941-765-6607
Daytime Telephone number

1097-1756

AL FEB - 6 1997

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 23, 1997

MARYLU CZULEWICZ
5809 LAUDER ST.
FT. MYERS BEACH, FL 33931

SUBJECT: WOLFGANG, INC.
Ref. Number: W97000001756

We have received your document for WOLFGANG, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6928.

Agnes Lunt
Corporate Specialist

Letter Number: 897A00003485

ARTICLES OF INCORPORATION

FILED

97 FEB -6 PM 4: 11

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:

WOLFGANG AMB Inc.

ARTICLE II PRINCIPAL OFFICE

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

5809 LAUDER ST.
FT. MYERS BCH FL.
33931

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARYLU CZULEWICZ
5809 LAUDER ST.
FT. MYERS BCH. FL.
33931

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

MARYLU CZULEWICZ
5809 LAUDER ST.
FT. MYERS BCH. FL
33931

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

14 day of JANUARY, 19 97.

(An additional article must be added if an effective date is requested.)


Signature

Signature

Signature

Notarization is not required

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: WOLFGANG INC.
WOLFGANG AMB INC.

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

MARYLU CZULEWICZ
(NAME)

5809 LAUDER ST.
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

FT. MYERS BCH. FL. 33931
(CITY/STATE/ZIP)

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FILED
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.

Marylu Czulewicz
(SIGNATURE)

1/14/97
(DATE)