

P97000081423

2:46 PM

PUBLIC ACCESS SYSTEM  
ELECTRONIC FILING COVER SHEET

((H97000015555 0)))

TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY  
CONTACT: RAY STORMONT  
PHONE: (305)541-3694

ACCT#: 072450003255

FAX #: (305)541-3770

NAME: WIZZARD CANDLES CO.  
AUDIT NUMBER.....H97000015555  
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.  
CERT. OF STATUS..0  
CERT. COPIES.....1  
PAGES..... 7  
DEL.METHOD.. FAX  
EST.CHARGE.. \$122.50

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX  
AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

\*\* ENTER 'M' FOR MENU. \*\*

ENTER SELECTION AND <CR>:  
help F1 Option Menu F2

NUM

Connect: 00:04:59

FILED  
97 SEP 19 PM 12:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dmp  
9/19/97



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

September 19, 1997

EMPIRE

SUBJECT: WIZZARD CANDLES CO.  
REF: W97000021541

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please complete article 5.

If you have any further questions concerning your document, please call (850) 487-6931.

Becky McKnight  
Document Specialist

FAX Aud. #: H97000015555  
Letter Number: 697A00046496

197000015555

**ARTICLES OF INCORPORATION FILED**  
**WIZZARD CANDLES CO.**

97 SEP 19 PM 12: 12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I**

The name of this corporation shall be:  
**WIZZARD CANDLES CO.**

With the principal place of business located at:  
**149 INTERNATIONAL SPEEDWAY BLVD**  
**DAYTONA BEACH FL 32.114**

**ARTICLE II**  
**GENERAL NATURE OF BUSINESS**

The general nature of the business to be transacted by this Corporation shall be to engage in any and all lawful business permitted under the laws of the United States and the State of Florida.

**ARTICLE III**  
**CAPITAL STOCK**

This Corporation is authorized to issue 1.000 shares of Common Stock, par value \$1.00(one U.S. dollar) per share.)

**ARTICLE IV**  
**PREEMPTIVE RIGHTS**

Every shareholder, upon the sale for cash or any new common stock of this Corporation, shall have the right to purchase their pro rata share (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

**ARTICLE V**  
**INITIAL REGISTERED OFFICE**

The street address of the registered office of this Corporation is:  
**149 INTERNATIONAL SPEEDWAY BLVD**  
**DAYTONA BEACH FL 32.114**

The Name of the initial REGISTERED AGENT of this Corporation is:  
**JOÃO CARLOS HUTHMACHER**

PREPARED BY: THE LAW OFFICES OF ALAN S. GLUECK  
ALAN S. GLUECK # 224278  
141 NE 3<sup>RD</sup> AVE 9<sup>TH</sup> FLOOR, MIAMI, FL 33132(305) 373-6211

4400001555

**ARTICLE VI  
INITIAL BOARD OF DIRECTORS**

This Corporation shall have 1 Director(s) initially, the number of Directors may be either increased or diminished from time to time the bylaws, but shall never be less than one (1). The initial Director(s) of this Corporation is/are:

President - JOÃO CARLOS HUTHMACHER

**ARTICLE VII  
INCORPORATOR**

The name and address of the person signing this article is:  
JOÃO CARLOS HUTHMACHER  
4617 CASON COVC DR. # 911  
ORLANDO FL 32.811

**ARTICLE VIII  
INDEMNIFICATION**

The Corporation shall indemnify any officer or Director, or any former officers or Directors to the full extent permitted by law.

**ARTICLE IX  
MANAGEMENT OF CORPORATION SHAREHOLDERS**

All Corporate powers shall be exercised by or under the authority of, and the business and affairs of this Corporation shall be managed under the Director of, shareholders of this Corporation.

**ARTICLE X  
BY LAWS**

The power to adopt, after, amend or repeal by-laws shall be vested en the BOARD OF DIRECTORS and the SHAREHOLDER.

IN WITNESS WHEREOF, The undersigned incorporator has executed these Article of Incorporation this 18 DAY OF SEPTEMBER OF 1997

  
-Incorporator

4497000015555

STATE OF FLORIDA)  
COUNTY OF DADE )

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE  
ACKNOWLEDGMENTS IN STATE AND COUNTY SET FORTH ABOVE,  
PERSONALLY APPEARED.

JOÃO CARLOS HUTHMACHER

KNOWN TO ME TO BE THE PERSON WHO EXECUTED THE FOREGOING  
ARTICLES OF INCORPORATION, AND HE ACKNOWLEDGED BEFORE ME  
THAT HE EXECUTED SAME.

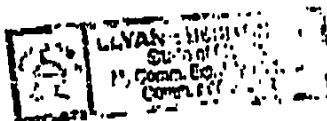
IN WITNESS WHEREOF, I HAVE HEREUNDER SET MY HAND AND AFFIXED  
MY OFFICIAL SEAL,

IN THE STATE AND COUNTY AFORESAID

THIS 18 DAY OF SEPTEMBER, 1997

  
\_\_\_\_\_  
NOTARY PUBLIC  
STATE OF FLORIDA AT LARGE

My commission expires:



555510000444

4497000015555

CERTIFICATE DESIGNATING THE ADDRESS AND AN  
AGENT UPON WHOM PROCESS MAY BE SERVED

FILED

97 SEP 19 PM 12:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

WITNESSETH:

THAT WIZZARD CANDLES CO.  
DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA,  
WHICH WILL HAVE ITS PRINCIPAL OFFICE IN THE COUNTY OF DADE, STATE  
OF FLORIDA HAS APPOINTED:

JOÃO CARLOS HUTHMACHER

AS ITS AGENT ACCEPT SERVICE OF PROCESS WITHIN THE STATE.

ACKNOWLEDGMENT:

HAVING BEEN NAMED BY THE FIRST BOARD OF DIRECTORS OF:

WIZZARD CANDLES CO.

TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION  
AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO  
ACT IN THE CAPACITY OF REGISTERED AGENT FOR SAID CORPORATION,  
AND AGREE TO COMPLY WITH THE APPLICABLE PROVISION OF THE  
FLORIDA STATUTES.

THIS 18 DAY OF SEPTEMBER

, 1997

  
Registered Agent

4497000015555

497000015555

## SPECIFIC POWER OF ATTORNEY

BE IT KNOWN, THAT I, WIZZARD CANDLES CO. **THE**  
 UNDERSIGNED, TO HEREBY GRANT A LIMITED AND SPECIFIC POWER OF ATTORNEY TO  
 THE LAW OFFICES OF ALAN S. CLUECK, OF MIAMI, FL  
 - AS MY ATTORNEY-IN-FACT.

SAID ATTORNEY-IN-FACT SHALL HAVE FULL POWER AND AUTHORITY TO UNDERTAKE  
 AND PERFORM ONLY THE FOLLOWING ACTS ON MY BEHALF:  
 MANAGE THE PROCEDURES IN ORDER TO OBTAIN FEIN #, ANY KIND OF BUSINESS  
 LICENSES, INQUIRE ABOUT LIABILITIES WITH THE IRS., FLORIDA DEPARTMENTS,  
 CUSTOMS, AND ANY OTHER GOVERNMENTAL OFFICE. THE AUTHORITY HEREIN SHALL  
 INCLUDE SUCH INCIDENTAL ACTS AS ARE REASONABLY REQUIRED TO CARRY OUT AND  
 PERFORM THE SPECIFIC AUTHORITIES GRANTED HEREIN.

MY ATTORNEY-IN-FACT AGREES TO ACCEPT THIS APPOINTMENT SUBJECT TO ACT AND  
 PERFORM IN SAID FIDUCIARY CAPACITY CONSISTENT WITH MY BEST INTEREST AS MY  
 ATTORNEY-IN-FACT IN THIS DISCRETION DEEMS ADVISABLE.

THIS POWER OF ATTORNEY IS EFFECTIVE UPON EXECUTION, THIS POWER OF ATTORNEY  
 MAY BE REVOKED BY ME AT ANY TIME, AND SHALL AUTOMATICALLY BE REVOKED  
 UPON MY DEATH, PROVIDED ANY PERSON RELYING ON THIS POWER OF ATTORNEY  
 SHALL HAVE FULL RIGHTS TO ACCEPT AND RELY UPON THE AUTHORITY OF MY  
 ATTORNEY-IN-FACT UNTIL IN RECEIPT OF ACTUAL NOTICE OF REVOCATION.

SIGNED UNDER SEAL THIS 18 DAY OF SEPTEMBER, 1997

STATE OF FLORIDA  
 COUNTY OF DADE

*Elyane Bechtinger*

On / / before me, ELYANE BECHTINGER personally appeared:

Personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose  
 name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the  
 same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the  
 person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

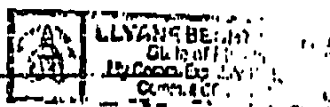
WITNESS MY HAND AND OFFICIAL SEAL.

Signature

Notary Public

Affiant Known ☒ Produced ID

Type of ID



497000015555