TRANSMITTAL LETTER 18000041076

DIVISION OF CORPORATIONS

98 MAY -4 PM 2:58

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

SUBJECT:	THE WALL JOI	JRNAL CORPO	SRATION				
(Proposed corporate name - must include suffix)							
				98165 01090001 *****78.75			
Enclosed is an o	original and one(1) copy of the articles	s of incorporation and a	check for :	•			
☐ \$70.0 Filing Fo	• • •	□\$122.50 Filing Fee & Certified Copy	□ \$131.25 Filing Fee, Certified Copy & Certificate				
		ADDITIONAL CO	OPY REQUIRED				
FROM: EL W. ANGOUE Name (Printed or typed)							
205 DANBY RO.							
Address							
City, State & Zip 941 369-0178 Daytime Telephone number							

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



The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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	ARTIC	CLE I	NAME
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The name of the corporation shall be:

THE WALL JOURNAL CORPORATION

ARTICLE II PRINCIPAL OFFICE

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

205 DANBY RD. LEHICH ACRES FL 33936

ARTICLE III SHARES

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

1.000.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

EL W. ANGOVE 205 DANSY RD. LEHIGH ACRES, FL 33936

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

EL W. ANGOVE 205 DANBY RO., LEHIGH ACRES, FL 33936

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

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/Registered Agent