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TRANSMITTAL LETTER

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

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-06/04/98--01018--020  
\*\*\*\*131.25 \*\*\*\*131.25

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

N

FILED  
98 JUN -4 AM 8:10  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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

FROM: ROBERT S. WILLIAMS  
Name (Printed or typed)

7529 CANAL DRIVE  
Address

LAKE WORTH, FLA. 33467  
City, State & Zip

561 - 588 - 6649  
Daytime Telephone number

F. CHESLER JUN 8 1998

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

## ARTICLES OF INCORPORATION

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

### ARTICLE I      NAME

The name of the corporation shall be:

WAX KING, INC.

### ARTICLE II      PRINCIPAL OFFICE

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

132 N. Federal Highway. LAKE WORTH, FLA. 33460

### ARTICLE III      SHARES

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

100 SHARES

### ARTICLE IV      INITIAL REGISTERED AGENT AND STREET ADDRESS

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

SAME AS INCORPORATOR

### ARTICLE V      INCORPORATOR

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

ROBERT S. WILLIAMS  
7529 CANAL DRIVE  
LAKE WORTH, FLA. 33467

*Robert S. Williams*

Signature/Incorporator

6-1-98

Date

REGISTERED AGENT

(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

Date