

TRANSMITTAL LETTER

P98000056168

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

000002567350--0
-06/22/98--01026--013
*****78.75 *****78.75

SUBJECT:

CO.
ACWYN, 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

FROM:

LESLIE K. WILSON
Name (Printed or typed)

3823 SATIN LEAF CT
Address

DELRAY BEACH FL 33445
City, State & Zip

561-498-7640
Daytime Telephone number

98 JUN 22 AM 8:05

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

RP
06-24-98

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 JUN 22 AM 8:05

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:

ALLWYN, INC. CO.

ARTICLE II PRINCIPAL OFFICE

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

3823 SATIN LEAF CT.
DELRAY BEACH FL 33445

ARTICLE III SHARES

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

20

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LESLIE K. WILSON
3823 SATIN LEAF CT.
DELRAY BEACH FL 33445

ARTICLE V INCORPORATOR

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

LESLIE K. WILSON
3823 SATIN LEAF CT.
DELRAY BEACH FL 33445

Leslie K. Wilson

Signature/Incorporator

6/12/98

Date

(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.

Leslie K. Wilson

Signature/Registered Agent

6/12/98

Date