

TRANSMITTAL LETTER

P98000101809

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

SUBJECT:

SHERWIN ENTERPRISES, INC
(Proposed corporate name - must include suffix)

400002700434-6
-12/02/98-01066-014
*****78.75 *****78.75

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 of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

LINDA M. SHERWIN

Name (Printed or typed)

1402 EAST LAS OLAS BLVD.

Address

SUITE 107

FORT LAUDERDALE, FL 33301

City, State & Zip

954-574-6255

Daytime Telephone number

FILED
98 DEC -2 AM 9:11:0
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

12-2-98
2

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:

Sherwin Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1402 East Las Olas Blvd., Suite 707
Fort Lauderdale, FL 33301

ARTICLE III SHARES

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

100,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

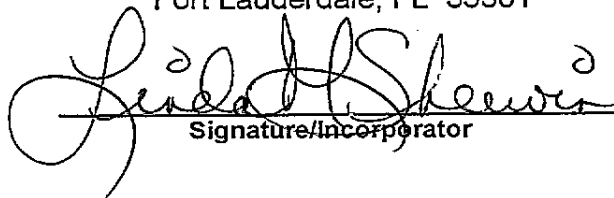
The name and Florida street address of the initial registered agent are:

Linda M. Sherwin
1402 East Las Olas Blvd., Suite 707
Fort Lauderdale, FL 33301

ARTICLE V INCORPORATOR

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

Linda M. Sherwin
1402 East Las Olas Blvd., Suite 707
Fort Lauderdale, FL 33301

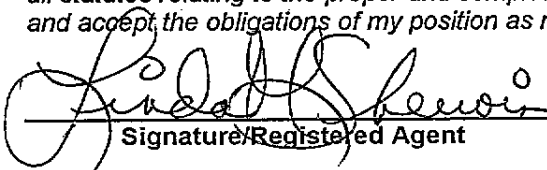


Signature/Incorporator

11/30/98

Date

Having been named as registered agent and to accept service of process for the above state 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



Signature/Registered Agent

11/30/98

Date

FILED
98 DEC -2 AM 9:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA