290000 LLGOT

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

SUBJECT:	WILDS PO	T INC. ate name - must include suff	īx)	·
		sc	0002780 ⁻ -02/19/990 *****70.00	7883 1060011 ******70.00
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 ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: ANDREW Barna Name (Printed or typed)				
	164 Bryn M	<u>NawY</u> ddress	· . – · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · ·
	Lake Worth, City,	FL 334	60	
•	561-707-8	3707 elephone number	- .	

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:

WILDSPOT INC.

ARTICLE II PRINCIPAL OFFICE

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

164 BRYN MAWR DRIVE, LAKE WORTH FL 33460

ARTICLE III SHARES

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

(2) Two

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JOHN B. LAZAR 164 BRYN MAWR DRIVE, LAKE WORTH FL 33460

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

ANDREW BARNA

1020 NORTH GOLFVIEW ROAD LAKE WORTH, FL 33460

Signature/Incorporator

1/ 7/ 7 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

Signature/Registered Agent

2799

Date