# P9900008799

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

000003069090--3. -12/14/99--01036--012 \*\*\*\*122.50 \*\*\*\*\*\*78.75,

	WORLDWIDE	
SUBJECT:	WATEH CONNECTIONS, COSP.	-
5020201	(Proposed corporate name - thust include suffix)	Ì

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

\$131.25

Filing Fee

- Filing Fee,
- & Certified Copy
- Certified Copy & Certificate

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ADDITIONAL COPY REQUIRED

FROM:	RAVEN SHAFFMAN	
	Name (Printed or typed)	
	8816 COLLENS AVE #203	
Address		
5 7 %	SURFSZSE, FL 33184 City, State & Zip	
	City, State & Zip	
V >	(-a-t 0 au/a	

FILED 2:59
BY DEC 14 PM 2:59
SELEH STATE

(305) 933-8463

ROUS Shoff GAVE
AUTHORIZATION BY PHONE TO
CORRECT LANCE

DATE 17-16 99

Daytime Telephone number

T. Burch DEC 1 6 1999

### ARTICLES OF INCORPORATION

99 DEC 14 PM 2: 59

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall he

WATEH CONDECTEORS, CUSP.

ARTICLE II PRINCIPAL OFFICE

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

8816 COLLENS AVE +1203 SURFERE, FL 33159

ARTICLE III SHARES

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

100 @ 1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PANEN SHAFFMAN 8816 COLLENS ANG #203 SURFSISE, FL 33154

#### ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LOCENA STAFFMAN & PLAVEN STAFFMAN 8816 COLLINS AVE #203 SURFSIDE, FL 33154

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

27 day of OCTOBER .. , 19 99

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

Signature

Signature

Signature

## Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	WORLDWIDE = WATCH CONDECTIONS, GOID.
2. The name and address of the r	egistered agent and office is:
BAVE.	U SHAFFMAN DEC TO
8816 (P.	COLLZIOS AVE #203  D. Box of Mail Drop Box NOT ACCEPTABLE)
SURF	2SE, FL 331SY DM 99

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) (DATE)

# P9900008799

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

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& Certificate

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& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM:	RAVEN SHAFFMAN  Name (Printed or typed)
	8816 COLLENS AVE #1203 Address
752 42	SURFSESE, FL 33154 City, State & Zip
<b>.</b>	(305) 933-8463

<b>6.</b>	
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DATE 17 69	
DOC. EXAM	

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ARTICLE I NAME

The name of the corporation shall be-

WORLDWIDE \_\_\_\_ WATCH CONNETZONS, CUSP.

100

ARTICLE II PRINCIPAL OFFICE

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8816 COCLEUS AVE #203 SURFSERE, FL 33154

ARTICLE III SHARES

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

100 @ 1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BAVEN SHAFFMAN 8816 COLLENS AVE #203 SURFSESE, FL 33154

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PLAVEN SHAFFMAN &
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SURFST&E, FL 33154

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2. The name and address of the re	gistered agent and office is:		
PAVER	) SHAFFMAN (NAME)	SECRETARY STATES	00 DEC 11
8816 (P.O.	COULTIOS AVE FOR BOX OF MAIL Drop BOX NOT ACCEPTABLE)	<b>○</b> **	FILED
SURFS	ESE, FL 33154 (CITY/STATE/IP)	TE A	л o

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