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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 OCT 23 PM 4:36

APPROVED
AND
FILED

11/11

COVER LETTER



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

SUBJECT: Westonave, Inc

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

 \$78.75	 \$87.50
Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Delroye West

Name (Printed or typed)

2950 NW 46th Ave, Unit 208

Address

Lauderdale Lakes, Fl 33313

City, State & Zip

954-320-0411

Daytime Telephone number

westonaveinc@gmail.com

E-mail address: (to be used for future annual report notification)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Westonave, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2950 NW 46th Ave,

Unit 208

Lauderdale Lakes, FL 33313

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Construction Consultation

ARTICLE IV SHARES

The number of shares of stock is: 25

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Delroye West

Name and Title: Jennifer West

Address 2950 NW 46th Ave

Address: 2950 NW 46th Ave

Unit 208

Unit 208

Lauderdale Lakes, FL 33313

Lauderdale Lakes, FL 33313

Name and Title: Osmond West

Name and Title: _____

Address 2950 NW 46th Ave

Address: _____

Unit 208

Lauderdale Lake, FL

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

APPROVED
AND
FILED

Name and Title: _____ Name and Title: 15 OCT 23 PM 4:36
Address: _____ Address: SECRETARY OF STATE

_____ TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Delroye West
Address: 2950 NW 46th Ave, Unit 208
Lauderdale Lakes, FL 33313

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Delroye West
Address: 2950 NW 46th Ave, Unit 208
Lauderdale Lakes, FL 33313

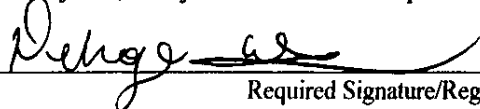
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

10/05/2015
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

10/05/2015
Date