N1500009881

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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09/04/15--01004--009 **78.75





COVER LETTER

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

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

\$70.00 Filing Fee Filing Fee & Certificate of Status

□\$78.75

Filing Fee & Certified Copy \$87.50

Filing Fee, Certified Copy & Certificate

11

ADDITIONAL COPY REQUIRED

Mlami, FL 33169 City, State & Zip

305-812-5356

Daytime Telephone number

Wearenature 123 @gmail.com E-mail address: (to be used for future annual report notification)

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



HILL HALD

15 OCT - 1 AM 10: 42

FLORIDA DEPARTMENT OF STATE Division of Corporations

September 15, 2015

NADIA SULTAN 825 NW 198 STREET MIAMI, FL 33169

SUBJECT: WE ARE NATURE INC. Ref. Number: W15000060328

We have received your document for WE ARE NATURE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 915A00019430

15 OCT -1 PM 3-58
SECRETAR OF STATE

AKTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

The name of the corporation shall be: We the We	we Inc.
ARTICLE II PRINCIPAL OFFICE	FILED
Principal <u>street</u> address: 825 NW 198 ST	Mailing address, if different is: 35 ORETARY OF STATE ALL ANDS SELECTION DA
miami, FL 33169	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: to redupollution. We Are Nature strives that humans have inflicted	ce the effects of water to correct the damage on the environment.
ARTICLE IV MANNER OF ELECTION The manner in which the Elected by president ann ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	ualy.
Name and Title: Nacla Suttan/Resident Name and Toddess 825 NW 198 ST. Address: Mamf, F1, 33169	Citle:
Name and Title: Claudia Castro/Trasvier Name and Todal Address Miami, F1, 33169 Name and Title: Claudia Castro/Trasvier Name and Todal Address: Name and Todal Address:	Citle:
Name and Title: <u>Fsabella Castillo/Secratary</u> Name and T Address <u>6471 SW 4th St.</u> Address: <u>Miami, F1, 33144</u>	Fitle:

Name and Title:	,	Name and Title:	<u></u>
Address		Address:	
•			
Name and Title:		Name and Title:	
Address		Address:	
_			
ARTICLE VI R. The name and Flor	EGISTERED AGENT ida street address (P.O. Box NOT acce	ntable) of the registered agent is:	
Name:	Claudia Castro		15 0
Address:	825 NW 198		
	Miami 1/2 331	169	
ARTICLE VII II	VCORPORATOR ress of the Incorporator is:		78.05 55.05 78.05
Name:	Nadia Sulta	<u> </u>	.,
Address:	825 NW 198	Staet	
	Mari ph 3	33169	
	FFECTIVE DATE: her than the date of filing: e is listed, the date must be specific an	. (OPTIONAL) and cannot be more than five business	days prior or 90 business days
Note: If the date in	serted in this block does not meet the ap		this date will not be listed as the
	ed as registered agent to accept service niliar with and accept the appointment a	as registered agent and agree to act in th	
	Required Signature of Registered	l Agent	Date
	nent and affirm that the facts stated here of State constitutes a third degree felony		information submitted in a document
	Required Signature of Incor	· · · · · · · · · · · · · · · · · · ·	8/28/15
	Required Signature of Incor	rporator	Date