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(Business Entity Name)			
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Certified Copies	_ Certificates	of Status	
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SECRETATION STATE TALLARY SEEL FLORIDA

624/B),

TRANSMITTAL LETTER

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

SUBJECT: We	estwood Apparel, Inc.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDBSUBBX</u>	
r	inal and ana (1) same after an	ti-lea - Si	do choule form	
Enclosed are an ong	ginal and one (1) copy of the ar	ucles of incorporation and	а а спеск юг:	
\$70.00	2 \$78.75	□ \$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
		ADDITIONAL CO	OPY REQUIRED	
FROM:	Lou Ferris			
1 10111	Name	e (Printed or typed)	· · · · · · · · · · · · · · · · · · ·	
	4040 Dalaman Amana			
	1818 Delaney Avenue			
		Address		
	Orlando, FL 32806			
	City	, Štate & Zip		
	407-481-0644			
	Daytime	Telephone number	 _	

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

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:

Westwood Apparel, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1818 Delaney Avenue Orlando, FL 32806

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Apparel Wholesale Distribution

ARTICLE IV SHARES

The number of shares of stock is: 1.000.000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Lou Ferris, President 1818 Delaney Avenue Orlando, FL 32806

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is:

Lou Ferris, President 1818 Delaney Avenue Orlando, FL 32806

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lou Ferris, President 1818 Delaney Avenue Orlando, FL 32806

Having been farmed 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

Signature/Registered Agent

Signature/Incorporator

5/2

Signature/Incorporator

SECNE MAY OF STATE