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TRANSMITTAL LETTER

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

SUBJE	CT:	ear U Create Everytning		
		(Proposed corpo	rate name – must include	e suffix)
Enclosed	is an original	and one (1) copy of the articles	of incorporation and a c	theck for:
	☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	~
FROM:	Sheldon B	s. Williams		<u> </u>
Name(Printed or Typed)				
	721 NE 12	21 st Street	_	
		Address		
	North Mia	ımi. Florida 33161		
		City, State, Z	îp	
	305.981.4	637 or 305.758.2226 or 95	4.288.6555	<u>. </u>
		Daytime Telephor	ie 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 JUL 31 PM 4:01

Presiness Corporation Act, hereby adopts the following Articles of Incorporation.

TALLAHASSEE, FLORIDA

The name of the corporation shall be:

Wear U Create Everything N Apparel Inc.

ARTICLE II PRINCIPAL OFFICE

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

1420 NW 111th Street Miami, Florida 33167

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:

Sheldon B. Williams 721 NE 121st Street North Miami, Florida 33161

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

David P. Carby 1420 NW 111th Street

Miami, Florida 33167

Signature/Incorporator

(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