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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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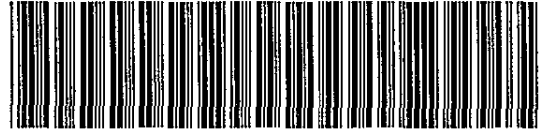
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 MAR 14 PM 2:04

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TRANSMITTAL LETTER

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

SUBJECT: Weir Consulting, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: William Edward Weir II

Name (Printed or typed)

36251 Horseshoe Dr.

Address

Zephyrhills, FL 33541

City, State & Zip

813-679-1522

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:

Weir Consulting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

36251 Horseshoe Dr.
Zephyrhills, FL 33541

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Trial technology consulting and planning.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

William Weir II
36251 Horseshoe Dr.
Zephyrhills, FL 33541
President

ARTICLE VI REGISTERED AGENT

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

William Weir II
36251 Horseshoe Dr.
Zephyrhills, FL 33541

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

William Weir II
36251 Horseshoe Dr.
Zephyrhills, FL 33541

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



Signature/Registered Agent

3/7/2005

Date



Signature/Incorporator

3/7/2005

Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA