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# **COVER LETTER**

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

SUBJECT:	Westerman Express Corp.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	i a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Adam Westerman Name (Printed or typed)			
	5607 Pga Blvd # 1727 Address			
	Orlando FL 32839 City, State & Zip			
	(321) 287-3431  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:

Westerman Express Corp.

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LORETARY OF STATE
TALL AHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5607 PGA Blvd. # 1727 Orlando FL 32839

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Services and Good Deliveries

#### 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):

Adam Westerman, President 5607 PGA Blvd. # 1727 Orlando FL 32839

#### ARTICLE VI REGISTERED AGENT

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

Adam Westerman 5607 PGA Blvd. # 1727 Orlando FL 32839

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Adam Westerman 5607 PGA Blvd. # 1727 Orlando FL 32839

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

Signature/Incorporator

Date

Date