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COVER LETTER

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

SUBJECT: WieWor	k Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INC</u> L	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED
FROM: Rit	a Wielatz	Printed or typed)	
	524 Courtney Dr.	Address	
	Temple Terrace, FL 33617 City,	State & Zip	
	813-988-1267 Daytime T	elephone 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)

FILED

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SECRETARY OF STATE TALLAHASSEL, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

WieWork Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 524 Courtney Dr.,

Temple Terrace, FL 33617

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To transact all legal business within the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares with no par value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Rita Wielatz 524 Courtney Dr.

Temple Terrace, FL 33617

ARTICLE VI REGISTERED AGENT

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

Rita Wielatz 524 Courtney Dr.

Temple Terrace, FL 33617

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Rita Wielatz 524 Courtney Dr.

Temple Terrace, FL 33617

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

| Colook
| Signature/Registered Agent | Date

Signature/Incorporator