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(Red	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
. (Bu:	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

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PS 2/2/11

COVER LETTER

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

.

SUBJECT: WEHGM Enterprises, I	nc.
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROм: Wyatt P. Edwards	
Name	(Printed or typed)
6877 N. Bighorn Pt	Address
,	tudioss
Hernando, FL 34442	
City,	State & Zip
(352) 344-8240 Daytime T	elephone number
wyattedwards@ymail.co E-mail address: (to be used	m d for future annual report notification)

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation shall be:	nc. FIBED
ARTICLE II PRINCIPAL OFFICE	11 CCD 1 DU 0
Principal street address	Mailing address, if different is: PM 3: 14
6877 N. Bighorn Pt	
Hernando, FL 34442	SCORE LARY OF STATE
	中部原始基础的 。
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Ecommerce, Online Products and Services	
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ARTICLE IV SHARES	
The number of shares of stock is: 100	
The named of short is.	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR	
Name and Title: <u>Director- Wyatt P. Edwards</u>	Name and Title:
Address: 6877 N. Bighorn Pt	Address:
Hernando, FL 34442	
Name and Title:	Name and Title:
Address:	A 11
Name and Title:	
Address:	Address:
	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of	
Name: Wyatt P. Edwards	
Address: 6877 N Bighorn Pt	_
Hernando, FL 34442	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Wyatt P Edwards	_
Address: 6877 N. Bighorn Pt	_
Hernando, FL 34442	<u></u>
Having been named as registered agent to accept service of proces	es for the above stated corneration at the place designated in
this certificate, it am familiar with and accept the appointment as rej	
	sairrea agens una agree to act as and capacity
World (My aux	1-31-11
Required Signature/Registered Agent	1-31-11 Date
> Required Signature Registered Agent	Date
I submit this document and affirm that the facts stated herein are	e true. I am aware that the false information submitted in a
document to the Department of State constitutes a third degree Jelon	
(M/) Sell ()	1 2 2
My ail b- Colland	
Required Signature/Incorporator	Date