P12000083256

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Prione #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

W12-48414



700239619757

09/17/12--01036--009 **87.50

12 OCT -1 PH 12: 34

× 10/02/12



RECEIVED

12 OCT -1 AM 10: 23

FLORIDA DEPARTMENT OF STATE FLORIDA DEPARTMENT OF STATE Division of Corporations

September 19, 2012

LORI HYDE 432 HIGHLAND CT. DUNEDIN, FL 34698

SUBJECT: WE ROCK INC. Ref. Number: W12000048414

We have received your document for WE ROCK INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L10000033361 (WEROCK, LLC).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 012A00023553

COVER LETTER

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

SUBJECT: WE ROCK 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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		

FROM: LOKI HYDE			
Name (Printed or typed)			
432 HIGHLAND CT.			
Address			
DUNLDIN FLORIDA 34698 City, State & Zip			
City, State & Zip			
7/6 - 3/6 - 8836 Daytime Telephone number			
Daytime Telephone number			
LHYDE 1711 @ HOTMAL, Com E-mail address: (to be used for future annual report notification)			
E-mail address: (to be used for future annual report notification)			

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 The name of the co	NAME apporation shall be: WE ROCK ENTERP	RISES INC.	
ARTICLE II	PRINCIPAL OFFICE		
-		address, if different is:	
ARTICLE III	PURPOSE		
	hich the corporation is organized is:		
PROFIT	/ SALES	·	
ARTICLE IV The number of shar			
	INITIAL OFFICERS AND/OR DIRECTORS		
Name and Ti Address:	tle: LORI HYDE / PRESIDENT Name and Title: 432 HIGH LAND CT Address: DUNLDIN FC 34698		
Name and Ti Address:	tle: MICHAIC MONTORO VI PRES. Name and Title: 2/5 MERRY MONT RD Address: BUFFALO N.Y. 14225		
Name and Ti Address:	tle:Name and Title:Address:		
	REGISTERED AGENT	*	
Name: Address:	rida street address (P.O. Box NOT acceptable) of the registered agent is: LONI ITYDE 432 HIGHLAND CT DUNEDIN FL 34698	2 OCT -1	
ARTICLE VII	INCORPORATOR		
	ress of the Incorporator is:	-14	
Name: Address:	LORI 1748E 432 1716HLAND CT DUNEDIN FL 34698	E: 34 STATE LORIDA	
	d as registered agent to accept service of process for the above stated corpo a familiar with and accept the appointment as registered agent and agree to a		
	/	~ / · · / · ·	
- D	Required Signature/Registered Agent	7//0//D Date	
I submit this docu	ment and affirm that the facts stated herein are true. I am aware that the	false information submitted in a	
document to the De	partment of State constitutes a third degree felony as provided for in s.817.15	5, F.S.	
2		9/10/12	
- · · · ·	Required Signature/Incorporator	Date	