

TRANSMITTAL LETTER

P990000027107

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

SUBJECT: WESTPARK GALLERIES INC
(Proposed corporate name - must include suffix)

200002812292--5
-03/19/99-01089--002
*****70.00 *****70.00

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

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: MARIAN VOSS
Name (Printed or typed)

6538 COLLINS #329
Address

MIAMI BEACH FL 33141
City, State & Zip

305 632 2370
Daytime Telephone number

FILED
99 MAR 19 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

B. BROCK MAR 24 1999

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

WESTPARK GALLERIES, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

6538 COLLINS #329
MIAMI BEACH FL 33141

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE HUNDRED THOUSAND

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

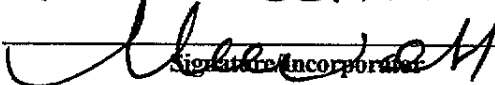
The name and Florida street address of the initial registered agent are:

MARIAN VOSS 6538 COLLINS #329
MIAMI BEACH FL 33141

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

MARIAN VOSS
6538 COLLINS #329
MIAMI BEACH FL 33141


Signature/Incorporator

3/16/99
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent


Signature/Registered Agent

3/16/99
Date

FILED
99 MAR 19 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA