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COVER LETTER

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

SUBJECT: IFA EN ACCION Co.		
(PROPOSED CORPORAT	E NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	les of incorporation an	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
	ADDITIONAL C	OPY REQUIRED
FROM: Luciano A. Pulido	(Printed or typed)	
4020 SW 122 Av.	ddress	
Miami, Fl 33175	State & Zip	
305-803-9552 Daytime Te	lephone number	
oshungere@aol.com E-mail address: (to be used	for future annual report	notification)

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

 $\{Y_i\}_{i=1}^n$

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FLORIDA DEPARTMENT OF STATE PLORIDA Division of Corporations

April 24, 2012

LUCIANO A. PULIDO 4020 SW 122 AVE MIAMI, FL 33175

SUBJECT: IFA EN ACCION CO. Ref. Number: W12000022598

We have received your document for IFA EN ACCION CO. 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 012A00012541

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

ARTICLE I N. The name of the corpo	AME IFA EN ACCION INC. ration shall be:		
402	Principal street address 20 SW 122 Av. ami, FI 33175		address, if different is: 9. St. Miami Fl.33186
The purpose for whice To provide infor approach on He	RPOSE h the corporation is organized is: mation about Ifa system through ou ealth, Educational and Social fields a a Master Piece of Oral and Intangil	and to preserve its	acknowledgement granted
The number of shares	HARES of stock is: 100 IITIAL OFFICERS AND/OR DIRECTORS	S	12 MAY . SECRETA
Name and Title:		Name and Title:	P D
Name and Title: Address:			25 05 05 05 05 05 05 05 05 05 05 05 05 05
Name and Title: Address:			
	a street address (P.O. Box NOT acceptable) of Luciano A. Pulido (President) 12800 Sw 149 St Miami Fl. 3318		, <u>, , , , , , , , , , , , , , , , , , </u>
	CORPORATOR s of the Incorporator is: Luciano A. Pulido (President) 12800 Sw 149 St Miami Fl. 33186	3	
Having been named a this certificate, I am fa	as registered agent to accept service of process amiliar with and accept the appaintment as regis	for the above stated corp stered agent and agree to t	act in this capacity
	Required Signature/Registered Agent	····	04/18/2012 Date
I submit this docume document to the Depa	nt and affirm that the facts stated herein are riment of State constitutes a third degree felony	true. I am aware that the as provided for in s.817.1	false information submitted in a 55, F.S.
	Required Signature/Ipeorporator		04/18/2012 Date