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COVER LETTER

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

SUBJECT: Azt limo, inc. (PROPOSED CORPORA		
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	nd a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
	ADDITIONAL C	OPY REQUIRED
FROM: EleNA Plesko Name	• • •	
6108 Pasadena Poi	nt blvd S Address	
Gulfport, FL 33 City.		
(718) 986-5426 Daytime Te	elephone number	
masada iii @ YAHOO. co. E-mail address: (to be used	(17) I for future annual report	notification)

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

FILED

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

12 AUG 15 MH 10: 38

The name of the corpor	ME ation shall be: Azt limo	p, inc.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PR	INCIPAL OFFICE		JULE FLORIDA
610	Principal street address Principal street addr	Mailin	ng address, if different is:
ARTICLE III PUI	RPOSE		74
		1	01/22/2009
The corpor	ation is organized	for the purp	pose of ,"
transactin	a and and all le	Well Queing	co under
Chapter 60	ation is organized is: ation is organized g any and all la 7, Florida Statute	s as amende	d from time to time
	and the second s	,	
ARTICLE V IN	ITIAL OFFICERS AND/OR DIRE	CTORS	
Name and Title:	Elena Pleskov – dizect 6108 fasadena Point Blvd	Name and Title:	
Address:	6108 rasadena roint biva Gulfport FL 33707	S Address:	
- -			
Name and Title:		Name and Title:	
Address:		Address:	
-			
-			
•			
Address:		Address:	
-			
ADMICUR III DE	CICARDED ACENT		
	CISTERED AGENT a street address (P.O. Box NOT acceptor	able) of the registered agent is:	
Name:	Flena Pleskov	no L	
Address:	6108 Pasadens Point 6	Rvd S	
	Gulfport, FL 33707		
	CORPORATOR		
The name and addres Name:	s of the Incorporator is: <u>Elena Pleskov</u>	,	
Name: Address:	6108 Pasadena Point 6	Red S	
71001000	6108 Pasadena Point 6 Gulfport, FL 33707	?	
	is registered agent to accept service of imiliar with and accept the appointment		
Q 01 1	//	1	12 10 2010
C. Flesho	Required Signature/Registered Age	SKOV	08.12.2012
	, 5	ziit	Date
I submit this document document to the Depart	nt and affirm that the facts stated her riment of State constitutes a third degre	ein are true. I am aware that se felony as provided for in s.8	the false information submitted in a 17.155, F.S.
E. Pleshol	/ El-11 DI-	dian	08 19 9019
c. I acshol	Required Signature/Incorporate	r	08.12,2012 Date