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COVER LETTER

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

SUBJECT:	AudioMonk	ceyz Inc	3.
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM:	Crystan R	and a (Printed or typed)	
	2507 NI	W 4th Co	ourt
	Boynton		-L 33426
	561-5	541-1331	
	randalla	•	yahoo.com
	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)

TICLE II PRI			,	z Inc
1103311 110	NCIPAL OFFICE Principal <u>street</u> addres	SS	,	Mailing address, if different is:
2507 N	VW 4th Co	urt		
Boynton	Beach , #	-L 33426		
RTICLE III PUR	POSE he corporation is orga	nizad is:		
, purpose for which t	ne corporation is organ	1120d 15.		
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				3
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				6 C
		ρ	N	PAR SE
RTICLE IV SHA	IRES stock is: 100	n 70,	/30	25
e number of shares of	Stock is. 700	<u>//</u>		
RTICLE V INI	TIAL OFFICERS A	ND/OR DIRECTO	ORS (E)	ALL PHILL DE
				e: Christian Rolle-Vice Pres.
4 ()	7507 1	JW 4+4 CT		2507 NW 4+h CT
Address		01-0	2.12.	0 -1 71
Address		BCHFL3	13426	Boynton Bch, FL 33
Address		BchFL3	<u> </u>	Boynton Bch, FL 33
	Boyntor			Boynton Bch, FL 33
	Boyntor		Name and Title	
Name and Title	Boyntor		Name and Title	e:
Name and Title	Boyntor		Name and Title Address:	e:
Name and Title Address	Boyntor		— Name and Title — Address: —	e:
Name and Title Address Name and Title	Boyntor		Name and Title Address: Name and Title	e:
Name and Title Address	Boyntor		Name and Title Address: Name and Title Address: Address:	e:

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) Name: 2507 NW 4th CT Boyhton Beach, F	of the registered agent is:
The name and address of the Incorporator is: Name: Address: Boynton Bch, Fi	1 33426
Having been named as registered agent to accept service of proce this certificate, I am familiar with and accept the appointment as remarks a compared Signature/Registered Agent I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third degree fellows. Required Signature/Incorporator	registered agent and agree to act in this capacity Lug 1, 2013 Date The true. I am aware that the false information submitted in a