TRANSMITTAL LETTER

Department of State
Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

PROPOSED CORPORATE NAME - MUSTINCLU **SUBJECT:** Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Wellington FL 33414 561- 790-0104

Daytime Telephone number

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

/H3/6/01

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME The name of the corporation shall be:	01 MAR -2 PM 3: 52
4-K Marketing, Inc.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	-
1795 Greenbrian Circle Wellington, FL 33414 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Sales	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS DIRECTORS (option The name(s) and address(es):	nal)
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	
Sherry L. Koepka 11785 Greenbriar Circle Wellington, FL 33414	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Sherry L. Koepka 11785 Green brow Circle Wellington FL 33414 **********************************	ې د سنده د د د د د د د د د د د د د د د د د د
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	
Signature/Registered Agent S.L. Koepka	<u> </u>
Signature/Incorporator S. L. Koepka	<u>2-28-0/</u> Date