Poloo TRANSMITTAL LETTER Der artment of State

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

SUBJECT: Mary Haustonic Enterprises, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed is an origin		;	200004621242 -10/03/0101025- ******78.75 ******	
Dire.osed is an origin	al and one(1) copy of the article	es of incorporation and a	check for:	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Name (Pr	inted or typed)		
<u>P.E. 3, Box 529 F.</u> Address				
	Staple , EL. City. S 352-468-27 Daytime Tel		OI OCT -3 PH 3: 07 SECHE ANASSIE FLORIDA	

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

Cof (

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	No.
ARTICLE I NAME The name of the corporation shall be:	;
Placy Hlavatouic, Enterprises, INC. ARTICLÉ II PRINCIPAL OFFICE	
The principal place of business/mailing address is: LE 3 Box 529 F. Stacke, FL 3209/	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Fee Processing	
ARTICLE IV SHARES The number of shares of stock is:	OI OCT SECK: TALLAII
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es): Placy Haustonic Rt. 3 Box 529 F Stacke, FL., 3209/	-3 PH 3: 07 ASSEEL FLORIDA
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: 10705 5 6 49 6 Que. Starke, F1., 3209/ May HLava tovic ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is: 10705	

Date Signature/Incorporator Date	27/01