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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

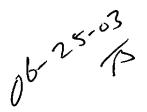
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UG/26/03--01003--UU2 **78.75





TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 ML CAR STAR COPP (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$87.50 \$70.00 \$78.75 Filing Fee Filing Fee Filing Fee, & Certified Copy & Certificate of Status Certified Copy

FROM:

Mark Baker

Name (Printed or typed)

1767 Hermitage Blup #16110

Address

Tallahassee FL 32368

City, State & Zip

407 797 3233

& Certificate of

Status

ADDITIONAL COPY REQUIRED

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

. *					
ARTICLES O	F INCORPO	RATION		FILED	
In compliance wi	th Chapter 607 a	nd/or Chapter 621,	F.S. (Profit)	SECRETARY OF DIVISION OF CORPO	STATE RATIONS
ARTICLE I	NAME			03 JUN 25 PM	4: I L
The name of the c			_		
		MI	. CAR S	STAR C	OFF.
ARTICLE II	PRINCIPAL	OFFICE			
The principal place					
1053	N. Monroe	e Street	Tallahass	ee FL	
ARTICLE III	PURPOSE				
The purpose for v	which the corpora	ation is organized is	3:		
ARTICLE IV	SHARES				
The number of sh	ares of stock is:	~			
	Į.	4			
ARTICLE V	INITIAL OFF	TCERS/DIRECT	ORS (optiona	ı <i>1</i>)	
The name(s), add	ress(es) and title	(s):			1
MarkBaker	President	, 1767 Hen	mitage BLVI	0# 10110 Talk	14455ee FL 3231
Isu Baler	Via Preside	ent "	/1 //	" /	j. j. j. j.
_					
ARTICLE VI	DECISTE	RED AGENT			
The name and El	orida street add	ress of the register	ed agent is:		
\overline{M}	ark Bater 1	767 Hermita	& BLUD #	10110	
•		Tallahasse	FL 3239	98	
ARTICLE VII The name and ac	INCORPOR				
	arkBaker	rporator is.			
/ * !! *	167 tleasur	Rin #10	110		
	o i no mnag	R BLUD #10 Talla	lygssee FL	32308	
**************************************		to accept service of pro	cess for the above s	**************************************	e place designated in this
				gree to act in this capac	
	1/1/4	7		6/24	403
Signature/Registe	red Agent			Date	1-
	///	7		=1	2012
	//2//	/		<u> </u>	24/05
Signature/Incorpo	Srator /			Date	