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(Address)				
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SECRETARY OF STATE
SECRETARY OF STATE

TRANSMITTAL LETTER

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

SUBJECT: Asno	es to Asnes Dust to Dust		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	(ID) (S(I) (
Enclosed are an oriș	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00	☑ \$78.75	\$78,75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
* ******B * ***	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status
		ADDITIONAL COPY REQUIRED	
FRÓM∙ N	Merland J. Conine		
11000	Name	e (Printed or typed)	
	2871 Sunrise Lakes Dr. E	aet	•
	20.1 0011100 20.100 5.112	Address	·
		Address	
	Sunrise, FL. 33322		
	City	, State & Zip	
	954-578-6643		
	Daytime	Telephone number	

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)

ARTICLE I NAME

The name of the corporation shall be: Ashes to Ashes Dust to Dust Inc. FILED

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SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8750 Azalea Ct, Unit # 203
Tamarac, FL. 33321

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Management, consulting planning and development. Company engaged in all operations of cemetaries and cremation facilities.

ARTICLE IV SHARES

The number of shares of stock is:

Five hundred (500)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Martin Feingold, P,S,T, & D. 8750 Azalea Ct., #203 Tamarac, FL. 33321

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Martin Feingold, 8750 Azalea Ct. #203 Tamarac, FL. 33321

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Martin Feingold 8750 Azalea Ct., #203 Tamarac, FL. 33321

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

Signature/Incorporator

Date

Date