P03000107026

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

Office Use Only



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2-30

TRANSMITTAL LETTER

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

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

a man	
ARTICLES OF INCORPORATION	Euto
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS
ARTICLE I NAME	
The name of the corporation shall be:	03 SEP 30 AM 11: 35
muw Enterprises, Inc.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
1478 Twin Lakes Circle Tallahassee FL. 323/1	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Retia 1	
ARTICLE IV SHARES	
The number of shares of stock is:	•
2	
ARTICLE V INITIAL OFFICERS/DIRECTORS (options	x1)
The name(s) address(es) and title(s):	
michael Wells - Presiden	<i>t</i>
mary Cannone-Vice Pre	esident
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> of the registered agent is:	.,
Michael Wells	
1478 Twin Lakes Circle	
Tallahassee, FL 32311	•
The name and address of the Incorporator is:	
Michael Wells	
1478 Twin Lakes Circle	-
tallahassee F1,3231/	
Having been named as registered agent to accept service of process for the above:	r*************************************
certificate, I am familiar with and accept the appointment as registered agent and a	
Michael M. M. M.	9-30-03
Signature/Registered Agent	Date

Michael N. Welk

Signature/Incorporator

Date