P0400061721

(Requ	estor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
`	•	·- ,		
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
		İ		

Office Use Only



600030906146

04/07/04 --01038--012 **78.75

04 APR -7 FH 1: 37

STUDY OF STUDY

x SH204

TRANSMITTAL LETTER

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

Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Shaw Taylor Name	(Printed or typed)		
	18550 NE 241 ALE Address			
	OTTRA PLOCIE			
	954 461 - 3	State & Zip 3796		
	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 The name of the corporation shall be: MAJESTIC CUSTOM FATELIORS TWO ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 18550 NE 344 AK CITTRA : FL 3211B ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: THE CORPORATION WAS furned for the purpose of A b thinking work AS A Sub-contractor SHARES <u>ARTICLE IV</u> ten / 10 shares of stock The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): President Show They for - 1850 NE 283 ME COTRA 32113 Vice-Pres Wester Taylor - 1850 NE BYH NE. CHIRA 32113 REGISTERED AGENT The name and Florida street address of the registered agent is: Show Taylor 18550 NE 24th AUE COTTRA 32113 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Show Taylor 18530 NE 244 A.E. CITRA FI 32/13 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 ignature/Registered Agent