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(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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2005 JAN 18 P 3: 52
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

95 JAN 18 P 3:

TRANSMITTAL LETTER

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

SUBJECT: Ku	stom Krete Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INC</u> L	<u>ude suffix</u>)
Enclosed are an orig	ginal and one (1) copy of the arti	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	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Brent Zullo		
	3240 SW 34th St. S	(Printed or typed) uite #233 Address	
- -	Ocala, FL 34474 City,	State & Zip	·
۰	(352) 361-414	4	

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:

Kustom Krete Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3240 SW 34th St. Suite #233 Ocala, FL 34474

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful business

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Brent Zullo 3240 SW 34th St. Suite #233 Ocala, FL 34474

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Brent Zullo 3240 SW 34th St. Suite #233 Ocala, FL 34474

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

Bren 3ult
Signature/Registered Agent
Date

1/14/05

Signature/Incorporator

SECRETARY OF STAT