

POS000142640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 OCT 20 AM 8:53

## COVER LETTER

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

SUBJECT: MY BUSTER ENTERPRISES, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: DAVID FLORE  
Name (Printed or typed)

8729 WASHINGTON VIEW DR.  
Address

WEST PALM BEACH, FL 33411  
City, State & Zip

412-670-8862  
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:

MY BUSTER ENTERPRISES, INC.

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## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3955 JOE RD.  
GREENACRES, FL 33463

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RETAIL GAME AND AMUSEMENT STORES

## ARTICLE IV SHARES

The number of shares of stock is:

100 (ONE HUNDRED).

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DAVID FIORE, PRESIDENT  
8729 WELLINGTON VIEW DR.  
W. PALM BEACH, FL 33411

## ARTICLE VI REGISTERED AGENT

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


DAVID FIORE  
8729 WELLINGTON VIEW DR.  
W. PALM BEACH, FL 33411

## ARTICLE VII INCORPORATOR

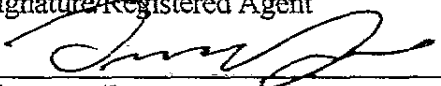
The name and address of the Incorporator is:

DAVID FIORE  
8729 WELLINGTON VIEW DR.  
W. PALM BEACH, FL 33411

\*\*\*\*\*  
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

10 | 18 | 05  
Date

  
Signature/Incorporator

10 | 18 | 05  
Date