# P06000025941

(Req	uestor's Name)	
(Addi	ress)	
- (Addı	ress)	
(City/	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doci	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
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/	Office Use On	



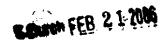
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### COVER LETTÉR

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

SUBJECT:	Pierre MAUGUL (PROPOSED CORPOR	Stin, INC.	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	i 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  PY REQUIRED
FROM:	Pierre M.Aug Nam Po Box 5903		
	Ft Laudodale City 954-274- Daytime	Address  Fl. 37359  N. State & Zip	
	Daytime	Telephone number	<del></del>

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)

#### <u>ARTICLE I</u>

The name of the corporation is: PIERRE M. AUGUSTIN, INC

#### ARTICLE II

The principle place of business address: 6736 N UNIVERSITY DR. TAMARAC, FL. 33321

The mailing address of the corporation is: 6736 N UNIVERSITY DR. TAMARAC, FL. 33321

#### ARTICLE III

The purpose for which this corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

#### ARTICLE IV

The number of shares the corporation is authorized to issue is: 1,000

#### ARTICLE V

The name and street address of the registered agent is:

PIERRE M.AUGUSTIN 6736 N UNIVERSITY DR

TAMARAC, FL. 33321

PIERRE M. AUGUSTIN

#### ARTICLE VI

The name and address of the incorporator is:

PIERRE M.AUGUSTIN

6736 N UNIVERSITY DR

TAMARAC, FL. 33321

#### <u>ARTICLE VII</u>

The initial officer(s) and/or director(s) of the corporation is are:

TITLE: PRES/VP/SEC/TREA

PIERRE M.AUGUSTIN

6736 N UNIVERSITY DR

TAMARAC, FL. 33321