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(Requestor's Name)				
(Address)				
(Address)	_			
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PICK-UP WAIT MAIL				
(Business Entity Name)	_			
(Document Number)	_			
Certified Copies Certificates of Status	_			
Special Instructions to Filing Officer:	٦			
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COVER LETTER

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

SUBJECT:	(PROPOSED CORPORA	treer Develop	oneut, IN
	(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	UDE SUFFIX)
Enclosed are an original	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
1 mily 1 00	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
		ADDITIONAL CO	Status DPY REQUIRED
FROM:	MARK MASO	N .	
	Name	e (Printed or typed)	
	4213 Synnit	Creex Blud, Address	世7303
	OR laudo F	700: 14 325 State & Zip	337
	City	, State & Lip	
	(407) 857-1 Daytime) 5 99	

NOTE: Please provide the original and one copy of the articles.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the corporation shall be: Educational Career Development, Inc	ij
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 4213 Summit Creek Blvd, STe. #7:	303
Orlando, FL. 32837	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Consultant for Work Force Development	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
MARK MASON, 4213 Sunnit Creek Blvd. STe. # 7303	
President ORlando, PL. 32837	
SECTALL TALL	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: 22 TO MARX MAJON, 4213 Summit Creek Bayal. Ste. # 730330 DRIANDO, FL 32837	
ARTICLE VII INCORPORATOR	
MARK MASON, 4213 Summit Creek Blvd. 7303 ORLANDO, PL. 32837	

Signature/Incomporator Date	