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Special Instructions to Filing Officer:				





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COVER LETTER

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

SUBJECT:	Sebastian	INC.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l 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
	c. ,	ADDITIONAL CO	
	Sebastian Name	4	
<u>.</u>	Quincy 7	1 32351 State & Zip	 .
-	850 <u>4</u>	42-340L	?

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: Sebastian Carpen	Hey Inc
The principal place of business/mailing address is: 1567 Pine Grove Church Rd Quincy Fl 32351 ARTICLE III PURPOSE The purpose for which the corporation is organized is: CArpenting ARTICLE IV SHARES The number of shares of stock is:	O6 AUG 16 AM II: 52 SECRETARY OF STATE TALLAHASSEE. FLORID
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Sebastian Miguel - OWNER 1567 Pine Grove Church Rd Quincy Fl 32351	52 571 1ATL DRIDA
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered Sebastian Miguel 1567 Pine Grove church Rd Quin Cy	-
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Sebastian Miguel 1567 Pine Grove church Rd Duincy	F132351
**************************************	**************************************
Signature/Registered Agent Months Myul Signature/Incorporator	76/06 Date Date