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(Re	equestor's Name)			
(Ac	ldress)			
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(City/State/Zip/Phone #)				
PICK-UP	WAIT .	MAIL		
(Bu	siness Entity Nar	me)		
,				
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
Casaiol Instructions to	Filing Officer	1		
Special Instructions to	Filing Officer:			
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ALLAHASSEF FLORING



COVER LETTER

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

SUBJECT:	AID IN WAKE	ALLA Inc. TATE NAME - MUST INCI	
	(PROPOSED CORPOR	ATE NAME – <u>MUST INC</u> I	LUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l a check for:
\$70.00 Filling 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
		ADDITIONAL	T REQUIRED :
FROM:	Deborah S.	A +Kins (Printed or typed)	
•	211 SANDER	Cent. Rd.	
	Sopchoppy City	Florida 32 v, State & Zip	358
	850 - 962- Daytime	7897 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:

MAID IN WAKULA CORP INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE II	PRINCIP	AL OFFICE

The principal street address and mailing address, if different is:

2/1 SANDERS Cent. R.L. Sop. Fl 3235F ARTICLE III PURPOSE The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V	INITIAL OFFICER	S AND/OR	DIRECTORS
List name(s), add	lress(es) and specific tit	le(s):	
	. S. AHCINS	_	
211 SAN	DERS Cent.	Rd.	
Sop. A	.3235P		

ARTICLE VI REGISTERED AGENT

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

Deborah. S-A+Kirus 211 SANDEIRS Rd. SM. Fl. 32358 ARTICLEVII INCORPORATOR

The name and address of the Incorporator is:

Deborah. 5 Attins 211 SANGEIRSUND. Soft 1 32358

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

Colors

Signature/Registered Agent

Date

4-22-05

Signature/Incorporator

Date