P08000044557

(Reques	tor's Name)	
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IC HICK	ite/Zip/Phone #	
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PICK-UP] WAIT	MAIL
(Busines	ss Entity Name)	
(Docume	ent Number)	
Certified Copies	Certificates of	Status
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

1.162-20382

COVER LETTER

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

SUBJECT: BOX MASTERS J	:PC	
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	les of incorporation and	d a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL CO	
FROM: Arturo M. Qui Name (oleau Blyd address	#201
Miami, FL City,	33172 State & Zip	
305 - 206 - 32 Daytime To	elephone number	
NOTE: Please provide the or	A District of Copy of grant and one copy of	ATHER STATES



April 22, 2008

ARTURO M. QUINTERO 8873 B FONTAINEBLEAU BLVD #201 MIAMI, FL 33172

SUBJECT: BOX MASTERS, INC. Ref. Number: W08000020382

We have received your document for BOX MASTERS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 908A00024204

ARTICLES OF INCORPORATION	FILED
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	08 MAY - 1 PM 4:00
The name of the corporation shall be:	SECRETARY OF
Box Masters, INC.	SECRETARY OF STATE FALLAHASSEE, FLORIDA
	CONTUA
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if different is: 8873 6 Fontaine bleno Blvd #201	,
MIAMI FC 33172	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
SALES, Distribution	
ARTICLE IV SHARES	
The number of shares of stock is:	
7 (OHE)	·
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR	<u>s</u>
List name(s), address(es) and specific title(s):	
ATUTO M. Quintero Blud #201	
8843, PUNJUNEPIENO DING 1.3%	
Miami, FL 33172	•
President	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Bay NOT acceptable) a	Ctha nanistanad nasat in
The name and Florida street address (P.O. Box NOT acceptable) o	The registered agent is:
8873B FONTAINEDIENO BIND # 201	
MIAMI, FL 33172	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Atturo Maintero Blvd #201	•
8873 10 HONTAING DIGITO	
MIAMI, FL 33172	********
Having been named as registered agent to accept service of process for the about	ve 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
MX (Ut)	4-25-08
Signature/Registered Agent	Date
Het Clit	4-16-08
Signature/Incorporator	Date