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(Requestor's Name)			
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PICK-UP	☐ WAIT	MAIL	
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(Bu	isiness Entity Na	me)	
(Document Number)			
Certified Copies	Certificate	e of Statue	
Ocraned Copies	_ Certificate	3 Of Status	
Special Instructions to	Filing Officer:		
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T. Burch OCI 14200

COVER LETTER

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

SUBJECT:	Full Fledo	ge Enterpr	ise Inc
-	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the artic	cles of incorporation and	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:	7041 Enviror	Address	
	Lauderhill, City, (954) 914-	State & Zip 2531 Celephone number	9

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: Full Fledge Enterprise Inc.	
ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 7041 Enuron Blud #128 Lauderhill, FL 33319 ARTICLE III PURPOSE The purpose for which the corporation is organized is: DISTRIBUTION & Sales	
ARTICLE IV SHARES The number of shares of stock is: O O ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	ZOUR OCT 14 SCONE TANY OF
List name(s), address(es) and specific title(s): Movion Robinson CEO 7041 Environ Blud#128 Lauderhill, FL 33319 ARTICLE VI REGISTERED AGENT	LED L PN 4: 15 EE, FLORIDA
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Movion Robinson ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Movion Robinson Movion Robins	
Having been named as registered agent to accept service of process for the above stated corporation at the p certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Signature/Registered Agent Date 10/9/0	**************************************
Signature/Incorporator Date	