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# **COVER LETTER**

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

SUBJECT: Coupon	ns, Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INC</u> L	UDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the artic	les 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 PPY REQUIRED	
FROM: Ja	son Brodie Name (	Printed or typed)		
1065 SE Fleming Way Address				
Stuart, FL 34997  City, State & Zip				
772-528-0380  Daytime 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:

Coupons, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1065 SE Fleming Way, Stuart, FL 34997

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Online Marketing

#### ARTICLE IV SHARES

The number of shares of stock is: 1000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Jason Brodie, 1065 SE Fleming Way, Stuart, FL 34997, CEO

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Jason Brodie, 1065 SE Fleming Way, Stuart, FL 34997, CEO

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Jason Brodie, 1065 SE Fleming Way, Stuart, FL 34997, CEO

************	*********
Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered ag	the above stated corporation at the place designated in this ent and agree to act in this capacity
Thod	2/18/09
Signarure/Registered Agent	Date
1/00	2/18/109
Signature/Incorporator	Date