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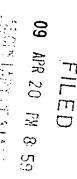
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PICK-UP WAIT MAIL				
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# **COVER LETTER**

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

SUBJECT: Jeremy	Hiatt Distributing, Inc. (PROPOSED CORPOR	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	i a check for:
\$70.00 Filing Fee		☐ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
FROM:	Je Nam	eremy Hiatt e (Printed or typed)	· · · · · · · · · · · · · · · · · · ·
	906 Emily Circle Address		
	Fort Walton Beach, Florida 32547 City, State & Zip		
		0)862-9347 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:

Jeremy Hiatt Distributing, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

906 Emily Circle Fort Walton Beach,FL 32547

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is: wholesale distributing

## ARTICLE IV SHARES

The number of shares of stock is:

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

President- Jeremy Hiatt

906 Emily Circle

Fort Walton Beach, FL 32547

#### ARTICLE VI REGISTERED AGENT

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

Jeremy Hiatt 906 Emily Circle Fort Walton Beach,FL 32547

# ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Jeremy Hiatt 906 Emily Circle Fort Waiton Beach,FL 32547

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 Jeremy Hight Date

April 15,2009

Date

April 15,2009

Signature/Incorporator Jeremy Hight Date

