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IN SEP 28 P 5:

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COVER LETTER

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

SUBJECT: W	All Street (PROPOSED CORPOR	FROM JEA RATE NAME - MUST INCL	Inc.	<u></u>			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:							
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Co & Certificate Status	e of			
FROM: Heiai Lengyel							
FROM: Name (Printed or typed)							
110	924 W. Fi	Address	Blvd	BOX	289		
Wellington FZ 33414 City, State & Zip							
561/628-0973 Daytime Telephone number							
	allstarm@ ao	1.com					
	E-mail address: (to be us	sed for future annual report	notification)				

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	Sec. Sp. Sp.
The name of the corporation shall be:	
Wall Street Fram IEA I	nc. Paragraph S. O.
ARTICLE II PRINCIPAL OFFICE	`08/JE
The principal street address and mailing address, if different is:	mailing address
13159 577 Place 5	11924 W. Forest that Bloom
Wellington, FL' 33414	Sulfe 22 Box 289
ARTICLE III PURPOSE	(MORELLA MONE)
The purpose for which the corporation is organized is:	Wellington FL 33414
High School Riding TEAM	,
ARTICLE IV SHARES	
The number of shares of stock is:	
10	
ARTICLE V INITIAL OFFICERS AND/OR DIRECT	ORS
ident Helai Lengye L \$	Vice President Teve Lengye L
11924 W. Forest thill Blug (5 Suite 22 Box 289 Wellington, TZ 33444	same address
welling ton, The 33444	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable	e) of the registered agent is:
13159 57th Place S	
Heid: (2ngyel	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Heia, Lenguel Hill Rlyd	
11924 W. Forst Hill Blud Suite 22 Box 289	
hellington. FZ 33414	
**************************************	*********
Having been named as registered agent to accept service of proplace designated in this certificate, I am familiar with and accept service of proplace designated in this certificate.	
agree to act in this capacity	epi ine upponument us registereu ugem unu
	0/00/25
The Krygel	9/23/09
Signature/Registered Agent	Date
That Lyne	9/23/09
Signature/Incorporator	Date