## P10000006290

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
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## **COVER LETTER**

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

SUBJECT: Abo	<del>re 2rd Bay</del> ond <del>Services, In</del> c.	ABOVE &BEYOR	JD CUSTOM I	<u>JIBUOPS</u> INC.
	(PROPOSED CORPO	DRATENAME – <u>MUS<b>TI</b>NCL</u>	<u>UDE SUFFIX</u> )	INC.
Enclosed are an o	original and one (1) copy of the	articles of incorporation and	a check for:	
□ \$70.0 Filing Fe	<b> </b>	■ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED	
FROM	Michael Eugene Glover	ame (Printed or typed)		
9790 S.E. Scory Lane Address				
<u>:</u>	City, State & Zip  772-631-5914  Daytime Telephone number			
_	E-mail address: (to be	used for future annual report i	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 The name of the corporation shall be: ABOUT AND BEYOND CUSTOM INTERLORS INC. ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 9790 S.E. Scory STUART FL ARTICLE III PURPOSE The purpose for which the corporation is organized is: AND ALL LAWFUL BUSINESS ARTICLE IV SHARES The number of shares of stock is: INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): MICHAEL E. GLOVER, PRESIDENT 9790 S.E. SCORY LANE, STUDIT FL 34997 REGISTÉRED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: MICHAEL E GLOVER 9790 S.E. SCORY LANE, STURT FL. 34997 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: MICHAEL E GLOVER 3790 S.E SCORY LANE, STUMF FL 34997 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

Mich Colombia 1-1/-/0
Signature/Registered Agent Date

Mul Colombia 1-1/-/0

Signature/Incorporator Date

agree to act in this capacity