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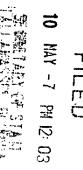
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# **COVER LETTER**

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

SUBJECT: Blue	Twin, Inc. (PROPOSED CORPOR	IATE NAME – <u>MUST INC</u> I	LUDE SUFFIX)
\$70.00 Filing Fee	ginal and one (1) copy of the ar  \$78.75  Filing Fee  & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Virginia Flagello Name	e (Printed or typed)	
	11550 NW 33 Rd. St.	Address	
	Sunrise, FL 33323	y, State & Zip	
	954 741 1480 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:

Blue Twin, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 11550 NW 33 Rd. St., Sunrise, FL 33323

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in e-commerce activities.



#### ARTICLE IV SHARES

The number of shares of stock is: 100

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Virginia Flagello - 11550 NW 33 Rd. St., Sunrise, FL 33323 - President\Secretary\Treasurer

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Virginia Flagello

11550 NW 33 Rd. St. Sunrise, FL 33323

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Virginia Flagello - 11550 NW 33 Rd. St., Sunrise, FL 33323

*******************	***********
Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and	ove stated corporation at the place designated in this d agree to act in this capacity
U-Flaull	5-4-10
Signature/Registered Agent	Date
U. Flalls	<u> 5-4-10</u>
Signature/Incorporator	Date