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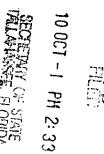
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COVER LETTER

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

SUBJECT: ARGUS PO	OLS, INC	UDE SUFFIX)		
(PROPOSED CORPORA	TIE NAME – <u>MUSI INCL</u>	UDE SUFFIX		
Enclosed are an original and one (1) copy of the art	icles of incorporation and	a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL COPY REQUIRED			
FROM: Robert Hickey Name (Printed or typed) 965 39th Ct Address				
West Palm Beach, Fl 33407				
561 - 396- 3434 Daytime Telephone number				
F-mail address: (to be use	d 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 *NAME* 10 OCT -1 PH 2:33 The name of the corporation shall be: PRINCIPAL OFFICE ARTICLE II The principal street address and mailing address, if different is: , WPB, P1 33407 ARTICLE III PURPOSE The purpose for which the corporation is organized is: DAII 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): The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: **INCORPORATOR** The name and address of the Incorporator is:

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 Signature/Incorporator

Date