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(Re	equestor's Name)			
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(Cit	ry/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
ANASSEE FLORIDA

MRD 10/26

COVER LETTER

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

SUBJECT: FlorCo Services, Inc.					
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)			
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d 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 C	OPY REQUIRED			
FROM: Angela Johnson Name (Printed or typed)					
1016 Thomas Dr. # 330					
Address Panama City Beach, Fl. 32408 City, State & Zip					
850.896.4985 Daytime Telephone number					
ajohnson8247@gmail.com E-mail address: (to be used 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 The name of the cor	NAME FlorCo Services, Inc. poration shall be:			
ARTICLE II	PRINCIPAL OFFICE			•
· .	Principal street address			Mailing address, if different is:
	00 Enterprise Dr.			nomas Dr. #330
Pa	anama City Beach, Fl 32408		Panam	a City Beach, FI 32408
ARTICLE III F	PIRPOSE			
	ich the corporation is organized is:			
Service Indust				O OCT 25 PM 2: 17 SECRETARY OF STATE SECRETARY OF STATE
	• •			PER CI
				新 22 年
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				MG 3 "
ARTICLE IV				Fo 19
The number of share	es of stock is:100			第三
ADTICLE II	INITIAL OFFICERS AND/OR DIRECTO	NDC		Dr.
	le:Keith A. Johnson, COO		e and Title	:Angela Johnson
Address:	1016 Thomas Dr. #330		ress:	1016 Thomas Dr. #330
	Panama city Beach, Fl 32408	······································		Panama City Beach, Fl. 32408
Name and Tit	le:Christina Hammer / Treasurer	Nam	e and Title	:Elizabeth Ray
Address:	3717 Tiki Dr.	Add		
•	Panama City Beach, Fl 32408			Panama City Beach, Fl 32417
				
Name and Tit	le:	Nam	e and Title	:
Address:		Add		
ARTICLE VI	REGISTERED AGENT			
	ida street address (P.O. Box NOT acceptable)	of the reg	gistered age	nt is:
Name:	Panama Hardwood & Tile Inc.	· ······		
Address:	109 Summerwood Dr.			
	Panama City Beach, Fl. 32413			
ARTICLE VII	INCORPORATOR			
	ress of the Incorporator is:			
Name:	Angela Johnson			
Address:	1016 Thomas Dr.#330			
	Panama City Beach, Fl 32408			
	d as registered agent to accept service of proce familiar with and accept the appointment as re			
- n	. 7			101001
Zlingebel	Required Signature/Registered Agent			10/90/10
. /	Required Signature/Registered Agent			Date
	nent and affirm that the facts stated herein a			
document to the Dep	partment of State constitutes a third degree felo	ony as pro	ovided for i	n s.817.155, F.S.
($\left(\right)_{0}$			1-1-2110
Lee	2 Sohnword			10/90/10
	Required Signature/Incorporator			1 Date