P10000089788

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

10 OCT 29 PH 3: 5



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COVER LETTER

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

_{SUBJECT:} iCan	n Entertainment		
_	(PROPOSED CORPOR	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)
		•	
Enclosed are an origin	nal and one (1) copy of the ar	ticles of incorporation ar	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
		<u> </u>	
FROM:		Lope Z le (Printed or typed)	
		23 ST	
	HIALEAU City	FL 330[]	3
	786- Daytime	77-07911 Telephone number	
DAN	E-mail address: (to be use	TAINMEN ed for future annual report	T.COM notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II	PRINCIPAL OFFICE			
Principal street address		Mailing ac	ddress, if different is:	
	901 NW 151 St #209 fiami Lakes, FL 33014			
- TA	IIIaiiii Lakes, 1 L 55014			
ARTICLE III	PURPOSE hich the corporation is organized is:			
Profit	then the corporation is organized is.			
ARTICLE IV	SHARES			
The number of shar	res of stock is: \			
APTICLE V	INITIAL OFFICERS AND/OR DIRECTO)RS		
	tle:Daniel Lopez President			
Address:	682 E 23 St	Address:		
i i i i i i i i i i i i i i i i i i i	682 E 23 St Hialeah, FL 33013		ALA ALA SECH	
Name and Ti	Va Caaraa Caraia Vian Brasidant	Nama and Title:	1ASS F.	
Address: <u>53</u>	tle:George Garcia Vice President 5365 Palm Ave #2	Name and Title		
	Hialeah, FL 33012			
			<u> </u>	
		No. 1 mil		
Name and Ti Address:	tle:	Name and Title:		
Address:				
			LANGE	
	REGISTERED AGENT	641		
The name and Floa Name:	rida street address (P.O. Box NOT acceptable)			
Address:	Daniel Lopez 682 E 23 St			
Addiess.	Hialeah, FL 33013			
		_		
	INCORPORATOR			
	ress of the Incorporator is:			
Name:	Daniel Lopez			
Address:	682 E 23 St Hialeah, FL 33013			
	Thalean, TE 33013			
Having been name	ed as registered agent to accept service of proce	ess for the above stated corpo	oration at the place designated in	
his certificate, Lan	n familiar with and accept the appointment as re	egistered agent and agree to a	ct in this capacity	
\mathcal{A}			10 0= 10	
	JA Nes	 	10-25-10	
	Required Signature/Registered Agent		Date	
l submit this door	ment and affirm that the facts stated herein a		false information submitted in a	
locument to the Di	ment and affirm that the facts stated herein a epartment of State constitutes a third degree felo	ony as provided for in s.817.15	5, F.S.	
women to meet	The man of the second section is the second		•	
			-	
			10-25-10 Date	