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## **COVER LETTER**

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

SUBJECT: Lewis E. Garlisi, P.A.		
(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 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL C	OPY REQUIRED
	(Printed or typed)	·
3418 Hanley Road, Ste.	102	<del></del>
Tampa, Florida 33618 City,		
813/767-6055	elephone number	· · · · · · · · · · · · · · · · · · ·
Igarlisi@verizon.net E-mail address: (to be used		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)

The name of the corporation shall be: Lewis E. Garlis	SI, P.A. A. J. A. A. B.
ARTICLE II PRINCIPAL OFFICE	M 21 - Adviso (Cd:00
Principal <u>street</u> address 3418 Handy Road, Suite 102	Mailing address, if different is:
Tampa, Florida 33618	All Change House,
F 100 100 100 100 100 100 100 100 100 10	1 18 miles 1 miles
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
All professional legal purposes.	
	ALI SE
, •	
ARTICLE IV SHARES	· · · · · · · · · · · · · · · · · · ·
The number of shares of stock is: 100 shares	SSE I
4 Description 11 11 11 11 11 11 11 11 11 11 11 11 11	THE TOTAL STATE OF THE STATE OF
Name and Title: Lewis E. Garlisi	Name and Title Procident / Director
Address: 3418 Handy Road, Suite 10	Name and Tibe. Plesident / Director
Tampa, Florida 33618	Σ <sub>m</sub> ω
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title: 15 th 10 to 10
Address:	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acc	centable) of the registered agent is:
Name: Lewis E. Garlisi	or are registered agent to
Address: 3418 Handy Road, Suite	102
Tampa, Florida 33618	
ADTICLE UIL INCOPPODATOR	en de la companya de
The name and address of the Incorporator is:	
Name: Lewis F Garlisi	
Address: P.O. Box 17938	·
Tampa, Florida 33682	
laving been named as registered agent to accept service his certificate, I am familiar with and accept the appointment of the a	e of process for the above stated corporation at the place designated nent as registered agent and agree to act in this capacity
the 4 Man	October 29, 2010
Required Signature/Registered	
submit this document and affirm that the facts stated	herein are true. I am aware that the false information submitted in
locument to the Department of State constitutes a third de	egree felony as provided for in s.817.155, F.S.
To 9. Mi	October 29, 2010
Required Signature/Incorpor	