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## **COVER LETTER**

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

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SUBJECT: Medical Supplies R Us, Inc.				
(PROPOSED CORPORAT	ΓΕ 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  ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED		
· ·				
FROM: Narupa Tiwari				
Name	(Printed or typed)			
1007 Coastal Circle		*		
Address				
Ocoee, Fl. 34761 City, State & Zip				
407-656-0800 Daytime Te	lephone number			
narupatiwari@yahoo.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 IV PURPOSE The purpose for which the corporation is organized is:  Distribute medical supplies  ARTICLE IV PURPOSE The purpose for which the corporation is organized is:  Distribute medical supplies  ARTICLE IV SHARES The number of shares of stock is: 100  ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Narupa Tiwari Address: Prasident Address:	ARTICLE I The name of the co	NAME Medical Supplies R prporation shall be:	Us, Inc.	
Nature Title:  Name and Title:  Address:  Versident  Address:  Versident  Address:  Address:  Address:  Article IV Registered Agent  Name and Title:  Address:  Addres	ARTICLE II	PRINCIPAL OFFICE		
ARTICLE II PURPOSE The purpose for which the corporation is organized is:  Distribute medical supplies  ARTICLE IV SHARES The number of shares of stock is: 100  ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Narupa Tiwari Address: President Address:  President Address: V. President Address:  1007 Coastal Circle Ocoee, Fl 34761  Name and Title: Lacquelyn Lil-Haq Name and Title: Address:  1007 Costal Circle Ocoee, Fl 34761  Name and Title: Narupa Tiwari Address: Address: Address:  1007 Costal Circle Ocoee, Fl 34761  Name and Title: Name and Title: Name and Title: Address: Name: Name: Narupa Tiwari Address: 1007 Coastal Circle Ocoee, Fl office Address: Address				Mailing address, if different is:
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Name and Title: Narupa Tiwari Address: President Address:			,	RETHRY OF PHIS
Address: President   1007 Coastal Circle   Ocoee, FI 34761    Name and Title: Jacquelyn Ul-Haq   Address:   V. President   Address:   V. President   Address:   V. President   Address:   V. President   Address:   Ocoee, FI 34761    Name and Title:   Name and Title:   Address:   1007 Coastal Circle   Ocoee, Florida 34761    ARTICLE VI	ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	<u>rors</u>	50 1:3
Name and Title:   Jacquelyn Ul-Haq   Name and Title:   Address:   V.President   Address:   V.President   Address:   1007 Costal Circle   Ocoee, Fl 34761   Name and Title:   Address:   A	Name and T	itle: Narupa Tiwari	Name and Title	· <u>22 6</u>
Name and Title:lacquelyn Ul-Haq Name and Title: Address: V.President Address: Address:				<u>or</u>
Name and Title: Jacquelyn Ul-Haq		_1007 Coastal Circle		
Address:    V. President		Ocoee, Fl 34761	<del></del>	
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