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*COVER LETTER

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

SUBJECT: John Barry Trading Co	mpany	Alban CHIERRA		
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)		
Enclosed are an original and one (1) copy of the article \$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED		
			1	
FROM: Thomas R. Cuba	(Drinted on turned)			
Name	(Printed or typed)			
3760 1st Av No				
4	Address			
St. Petersburg, FL 3371	3		201	<u>ر کاک</u>
City,	State & Zip		2010 DEC	
727-823-2443			C 20	3 kg -
Daytime T	elephone number		P#	
tom.cuba@verizon.net			<u> </u>	: T
E-mail address: (to be use	d for future annual repor	t 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		mpany	aviolet of persons
The name of the co	rporation shall be:	•	2010 000 00
ARTICLE II	PRINCIPAL OFFICE		2010 DEC 20 PM 1:1
	Principal street address	Mailing add	dress, if different is:
4	47 3rd Av No		
S	Suite 307		· · · · · · · · · · · · · · · · · · ·
S	t. Petersburg, FL 33701		
ARTICLE III			
	hich the corporation is organized is: chandise: retail sales via mail order o	or at promotional or trac	de events.
		,	
ARTICLE IV The number of share	SHARES res of stock is: 100 shares of common s	tock.	
	INITIAL OFFICERS AND/OR DIRECTO		
	itle: Thomas R. Cuba, President		
Address:	3760 1st Av No		
	St. Petersburg, FL 33713		
Name and Ti	itle:	Name and Title:	
Address:		Address:	
Address.			
Name and Ti	itle:	Name and Title:	
Address:		Address:	
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptable)		
Name:	Thomas R. Cuba	_	
Address:	3760 1st Av No		
	St. Petersburg, FL 33713		
ARTICLE VII	INCORPORATOR		
	dress of the Incorporator is:		
Name:	Thomas R. Cuba	_	
Address:			
	3760 1st Av No St. Petersburg, FL 33713		
	ed as registered agent to accept service of proce m familiar with and accept the appointment as re		
	TO OCL		12.11. 2010
	Required Signature/Registered Agent		
	reduited Signature registered Agent		Date
	iment and affirm that the facts stated herein ar		
aocument to the D	epartment of State constitutes a third degree felor	ny us proviaea jor in s.81 /.133	7, T a3.
	Required Signature/Incorporator		12.16.2010 Date
	Required Signature/Incorporator		Date