## V11000003070

(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:  Kickard Stephens  GAVE  AUTHORIZATION BY PHONE TO  CORRECT WILLE  DATE  DOC. EXAM  M. C.  DOC. EXAM			

Office Use Only



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## **COVER LETTER**

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

SUBJECT: Yacht Style Refinishir	ng, Inc,	
(PROPOSED CORPOR	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the a	rticles 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
	ADDITIONAL C	OPY REQUIRED
FROM: Richard Stephens	ne (Printed or typed)	
5680 SW 9 Street		
	Address	
Plantation, FL 33317	y, State & Zip	
954-608-2034 Daytime	Telephone number	
yachtstyle60@aol.com	sed 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		hing, Inc.	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing	address, if different is:
50	680 SW 9 Street		
	lantation, FL 33317		
<u> </u>			
ARTICLE III	DITEROSE		
	nich the corporation is organized is:		
Yacht Refinisi			
ARTICLE IV The number of share	<u>Shares</u>		M JAN 10 PH 2: 42  A JAN 10 PH 2: 42  A JAN 10 PH 2: 42
ADOTOL B. II	TATION AS CONTINUES AND AND PROPERTY	nno.	
	INITIAL OFFICERS AND/OR DIRECTO		過点だ
Name and 1 n	le:Richard Stephens, President		~~~
Address:	5680 SW 9 Street		
	Plantation, FL 33317		
Name and Tit	:le:	Name and Title:	
Address:		Address:	
radioss.			
	White is the second of the sec		
Name and Tit	de: - Subset Later on Automobile	Name and-Title:	
Address:		Address:	
ي د	Marine Company of the State		
	The state of the s		
ARTICLE VI	REGISTERED AGENT	• • •	
	ida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Richard Stephens		
Address:	5680 SW 9 Street		
reduioss.	Plantation, FL 33317		
	amanon, r.E. 330 i.	<del></del>	
ARTICLE VII	<u>INCORPORATOR</u>		
The name and add	ress of the Incorporator is:		
Name:	Richard Stephens		
Address:	5680 SW 9 Street		
	Plantation, FL 33317	<del></del>	
	d as registered agent to accept service of proc 1 familiar with and accept the appointment as r		
f			Jan. 5, 2011
	Required Signature/Registered Agent		Date
I submit this docur document to the De	nent and affirm that the facts stated herein a partment of State constitutes a third degree fel	re true. I am aware that thony as provided for in s.817.	e false information submitted in a 155, F.S.
سر ۱۳۹۱ و ۱۳۹۱		The second secon	** *** **** **** **** **** **** **** ****
	Required Signature/Incorporator	<del></del>	Jan. 5, 2011
	required Signature/Incorporator		Date