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(Requestor's Name)			
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PICK-UP WAIT	MAIL			
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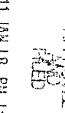
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DEFARTMENT OF STATE
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TALLAHASSEE, FLORIDA

SECHETATY U' STATE TALLAHASSEE FLORIDA





COVER LETTER

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

SUBJECT:	Ja (ed Hatcher E	interprises, Inco	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an	original and one (1) copy of the art	ticles of incorporation an	d a check for:
\$70.00 Filing Fe	Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate o Status
		ADDITIONAL C	OPY REQUIRED
FROM:	Jared: Hatcher	e (Printed or typed)	
	P.O. BOX 180757		
•			
	Talkhussee , FL City	プンジ/8 State & Zin	
	(85) 128-79 Daytime		
	Daytime natcher 870 and 1. Co. E-mail address: (to be us	Telephone number	,
•	E-mail address: (to be us	ed for future annual repor	t notification)

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

ARTICLES OF INCORPORATION

\$ 1. The In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME Jared Hatcher Enterprises, Inc. The name of the corporation shall be: PRINCIPAL OFFICE ARTICLE II Mailing address, if different is:
P.O. BOX /80787

Jallahotee, FL 328/8 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any and All Links business The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Hat cher/ Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: _ Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Jarod Amelia Name: Address: 3459 Welmyn Way TAILAINSTER, FL 32209 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Address: Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Required Signature/Incorporator