P/1000012858

(Ri	equestor's Name)					
(Ad	ddress)					
(Ac	ddress)					
(Cı	ty/State/Zip/Phon	e #)				
PICK-UP		MAIL				
(Bu	usiness Entity Nar	me)				
(Document Number)						
Certified Copies	Certificates	s of Status				
Special Instructions to	Filing Officer;					





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TO ACKNOVILEDGE SUFFICIENCY OF FILIN

HELLYNOSHUS SCHOISIANN SIMIS SCHORUSYSTAN

11 FEB-T'S
SECTIVE FARY OF TALLAHASSEE, FLO.

COVER LETTER

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

SUBJECT: <u>CHASE GREEN EN</u> (PROPOSED CORPOR	TERPRISE BNO	
(PROPOSED CORPOR	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 \$78.75 Filing Fee	\$78.75	\$87.50
−	✓ Filing Fee	Filing Fee.
& Certificate of Status	& Certified Copy	• •
·	1	& Certificate of
	A D D ITTLO NA A CO	Status
	ADDITIONAL C	OPY REQUIRED
FROM: YENCE ADDESON	/B !	
Nam	e (Printed or typed)	
0 0 0 1 10 00		
P.O. Box 1056	Address	
	71001033	
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PORT ST TOE !	F1 3 2.45 /	_
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(850) 441-8 Daytime	C08	
Davtime	l'elephone number	
,		
CHASE GREET E-mail address: (to be use	Y SINC @ YMA	SL.Com
E-mail address: (to be use	ed 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

NAME

FILED

The name of the corpo	ration shall be: CI-LASE GREEN	ENTER	PRISE IDAC	11 FEB - 7 PM 4#39
41	RINCIPAL OFFICE Principal street address OI PETERS ST. RT ST JOE, F1 32456		P. D. Box 1	ECHERARY OF STATE LESAMOSSEE: FLORIDA LESAMOSSEE LESAMO
ARTICLE III PU	RPOSE n the corporation is organized is: WI	al Est		E.R.
ARTICLE IV SE	IARES of stock is: /00			
Name and Title: Address:	TIAL OFFICERS AND/OR DIRECT VISNCENT ADDISON P.D. BOX 1056 PORT ST JOE, F1 3245	Name Addre	ess:	
Name and Title: Address:		Addre	ess:	
Name and Title: Address:	· · · · · · · · · · · · · · · · · · ·	Name Addre		
	SCISTERED AGENT 1 Street address (P.O. Box NOT acceptable YENCENT ADDISON 401 PETERS ST PORT ST JOE, F1 324)	stered agent is:	
ARTICLE VII IN The name and addres Name: Address:	CORPORATOR S of the Incorporator is: YEACENT ADDISON YOU PETERS ST PORT ST TREE, FL3:		·.	
Having been named a this certificate, I am fu	is registered agent to accept service of pr miliar with and accept the appointment as Required Signature Registered Agent		e above stated corpor igent and agree to ac	ation at the place designated in this capacity 2/9/11
I submit this documen document to the Depart	nt and diffirm that the flydds stated herein then of Stale constitutes a third degree f		am aware that the f vided for in s.817.155	alse information submitted in a $5, F.S.$
	Required Signature/Incorporator			Date