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(Requestor's Name)
(Address)
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(Gity/Gtate/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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COVER LETTER

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

SUBJECT: Dean Decker, Inc.		
(PROPOSED CORPORAT	FE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	eles 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: DEAN DECKER, INC. Name	(Printed or typed)	
8198 ROYAL PALM COL	JRT ddress	
TAMARAC. FL 33321	State & Zip	
954-410-6723 Daytime Te	elephone number	
dean.decker02@gmail.co	om 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)

RTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing address, if different is	s:
	3198 Royal Palm Court		······································
נ	amarac, FL 33321		
ARTICLE III	DIDDOCE		
	hich the corporation is organized is:		
Inspection Se			
ARTICLE IV	SHARES res of stock is: 1		
	INITIAL OFFICERS AND/OR DIRE	CTOPS	
Name and Ti	itle: Dean Decker, CEO	Name and Title:	
Address:	8198 Royal Palm Court	Address:	
	Tamarac, FL 33321		
None and T	:41	Name and Title.	
Address:	nie;	Name and Title:	
Address.		Address:	
	itle:	Name and Title:	
Address:			
	REGISTERED AGENT	111. \ \ c@db \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
ne <u>name and Fio</u> Name:	rida street address (P.O. Box NOT accepta Catherine Decker	ible) of the registered agent is:	
Name: Address:	8198 Royal Palm Court		
Address.	Tamarac, FL 33321		
ARTICLE VII			
	Iress of the Incorporator is:		
Name:	Catherine Decker		
Address:	8198 Royal Palm Court Tamarac, FL 33321	····	
Javina baan nam	ed as registered agent to accept service of	process for the above stated corporation at the place	e designated
iuving veen num	n familiar with and accept the appointment	t as registered agent and agree to act in this capacity	
	• (/) /		
	ine Olekes	3/1/2011	
	Required Signature/Registered Age		te
his certificate, I as LITHES submit this docu	ment and affirm that the facts stated here	nt Dat ein are true. I am aware that the false information s	
his certificate, I an LITHES Submit this docu locument to the D		nt Dat ein are true. I am aware that the false information s	