P11000038603

(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: D. IEV donne FERNAFGAVE AUTHORIZATION BY PHONE TO GAHLY CORRECT # DF Shares & Name GAHLY DATE # -21-11 Name Address DOC. EXAM. S. POHLINS			
Office Use Only			



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2011 APR 20 PK 2: 3
SECRETARY OF STATE

4-21-11

COVER LETTER

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

SUBJECT: LNternational Cab (Proposed corpor	(BB(BN) ASS ATENAME- <u>MUSTINC</u>	O_ (NVEST/6AATC	<u>`</u>
Enclosed are an original and one (1) copy of the ar	ticles of incorporation an	d a check for:	
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
FROM: DEVOONNE			
1082 N-W-		TALLAHASBEE.	FILED
21 HNBERNAIZOE	Telephone number Yuhoo. Com ed for future annual repor	*	FH 2: 30

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) International Caribbean Association Of Investigators, The name of the corporation shall be: Mailing address, if different is: Principal street address ARTICLE III PURPOSE The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: 15 INITIAL OFFICERS AND/OR DIRECTORS Name and Title: MUCR & Name and Title: ^ Address: Name and Title: Name and Title: Address: Name and Title: Name and Title: Address: REGISTERED AGENT The name and Florida street address (P.O. Box NQT acceptable) of the registered agent is: INCORPORATOR

The name and address of the Incorporator is:

Name: Address:

ARTICLE VII

Address:

Address:

Address:

ARTICLE VI

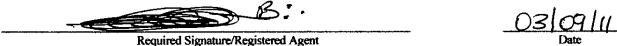
Name: Address:

ARTICLE II

DIFLIDONNE

Required Signature/Incorporator

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



I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a



Caribbean International of Investigators

April 22, 2011

Dear Ms. Sharon,

I dieudonne Bernard, owner of Caribbean International of Investigator is writing to advise you I do not intend to reinstate the administration of Caribbean International of Investigators.

If you have any questions do not hesitate to contact me on my cell at 954-245-9547

Regards,

Dieudonne Bernard