## BP11000040284

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Cil	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	<del></del>	

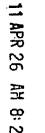
Office Use Only

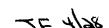


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## **COVER LETTER**

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

SUBJECT: Siracuse Services, Inc	<b>C</b> .	
(PROPOSED CORPOR	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one.(1), copy of the ar	rticles of incorporation an	nd 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 o Status
	ADDITIONAL C	OPY REQUIRED
FROM: Charles Siracuse	ne (Printed or typed)	
2748 Vernon Terrace #	6	
	Address	
Jacksonville, Florida 32	2205 v, State & Zip	
904-755-5614 Daytime	Telephone number	
Siracusec@yahoo.com E-mail address: (to be us	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)

TICLE II	PRINCIPAL OFFICE			
	Principal street address	Mailing ac	ddress, if different is:	
	2748 Vernon Terrace #6		<del> </del>	
<u>.</u>	lacksonville, Florida 32205			
RTICLE III	PURPOSE			
e purpose for w	hich the corporation is organized is:			
construction	n management layout and De	<sup>st</sup> g n		
RTICLE IV	SHARES res of stock is:100 Shares			
	INITIAL OFFICERS AND/OR DIRECT	ODC .		
	itle: Charles Siracuse President			
Address:	2748 Vernon Terrace #6	Address:		
	Jacksonville, Florida 32205			
Name and T	itle:	Name and Title:		
Address:	me.	Address:		
		<del></del>	<del> </del>	
Name and T	itle:	Name and Title:	<b>د د</b> ست	
			<u> </u>	
			Tm 20	
PTICI E III	REGISTERED AGENT		26 28	
	orida street address (P.O. Box NOT acceptable	of the registered agent is:	#	
Name:	Charles Siracuse	of the registered agent is.	n <sup>c</sup> =	
Address:	2748 Vernon Terrace #6	<del></del>	చ్చి త	
riddress.	Jacksonville, Florida 32205	<del></del>	i i i	
	•	<del></del>	# C.	
RTICLE VII	<u>INCORPORATOR</u>			
	dress of the Incorporator is:			
Name:	Charles Siracuse			
Address:	2748 Vernon Terrace #6			
	Jacksonville, Florida 32205			
	ed as registered agent to accept service of pro m familiar with and accept the appointment as			
is certificate, I a			4-9-11	
is certificate, I a			/ / /	

Date

Required Signature/Incorporator