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SECRETARY OF STATE
AND AHASSEE FLORID

MRS,

COVER LETTER

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

SUBJECT: YJ Electric Corp.				
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)		
Enclosed are an original and one (1) copy of the artic	cles 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 o		
	ADDITIONAL C	OPY REQUIRED		
FROM: Kristina Vidal Name	(Printed or typed)			
926 S.W. 143 Ter.				
Address				
Pembroke Pines, Fl. 330	027 State & Zip			
305-763-1436 Daytime Te	elephone number			
yjelectriccorp@yahoo.cor E-mail address: (to be used	m I for future annual report	notification)		

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

ARTICLES OF INCORPORATION

•	In compliance wi	ith Chapter 607 and/	or Chapter 621,	F.S. (Profit)	para A t
ARTICLE I	NAME				FILED
	corporation shall be: YJ E1	ectric Corp	· .		A CONTRACT OF THE PARTY OF THE
ARTICLE II	PRINCIPAL OFFICE	_			11 MAY 31 PM 1: 24
211(11(12)2)	Principal street address			Mailing addres	SECRETARY OF STATE ALLAHASSEE FLORIDA
	926 S.W. 143 Ter				ALLAHASSE TATE
	Pembroke Pines, FL3302	7			- TELANASSEE FLURIDA
ARTICLE III	PURPOSE				
The purpose for	which the corporation is organi	zed is:	5 to on	cade is	n an vartivies a
The purp	ove of this (orf	208011011 ·	0 10 (1)	Joigs 1	
60517055	which the corporation is organic OSE 07 this Corf , permitted un and State 0	iden the l I Florida:	-aws of	t the Un	ited States 07
America	and state o	1 1 10 10 10			
ARTICLE IV	SHARES				
The number of sl	nares of stock is: 100				
ARTICLE V	INITIAL OFFICERS ANI	OOR DIRECTOR	S		
	Title:Kristina Vidal		Name and Title	e:	<u> </u>
Address:	President		_ Address:		
	926 S.W. 143 Ter		-	•	
	Pembroke Pines, Fl				
	Title:		Name and Titl	e:	
Address:			Address:		
			-	<u> </u>	
				-	
Name and Address:	Title:		Name and 1111		
Address.			Addiess.		<u> </u>
			-		
ADTICI E IT	REGISTERED AGENT				
	lorida street address (P.O. Box	NOT acceptable) of	the registered age	ent is:	
Name:	Kristina Vidal	1 /			
Address:	926 S.W. 143 Ter		-		
	Pembroke Pines, F	FL33027	-		
ARTICLE VII	INCORPORATOR				
	ddress of the Incorporator is:				
Name: Address:	Kristina Vidal 926 S.W. 143 Ter				
Audicss.	Pembroke Pines, F	133027	-		
**			Con the atoms of	tated counceati	on at the place decionated in
	med as registered agent to accep am familiar with and accept the				
congresse, r		10		Ø: W	
_	ノ VVV ##	ン			5/25/11
	Required Signature/Re	egistered Agent			Date
I cubmit this do	\ cument and affirm that the fact	ts stated herein are	true I am awar	e that the fals	e information submitted in a
document to the	Department of State constitutes	a third degree felony	as provided for	in s.817.155, F	S.

6 | 25 | 11 Date