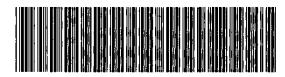
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(R	equestor's Name)	
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PICK-UP	WAIT	MAIL
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(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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7. 2011 1. 2010 1. 1. 2010 1. 2011

## **COVER LETTER**

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

SUBJECT: QU	ISQUEYA CARGO	SHIPPING C	orp.		
	(PROPOSED CORPORA	IE NAME – <u>MUSI INC</u>	LUDE SUFFIX)	•	
Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation ar	nd a check for:	7	
\$70.00 Filing Fee	\$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		
1			JALEC		
FROM:		NE J BRICOURT (Printed or typed)	D D D D D D D D D D D D D D D D D D D	南11 JUN 28	emu;
•	Name	(Filinea of typea)		28	
	18565 S\	W 42ND STREE	T S	豆	
		IAR FL 33029 State & Zip		AH 18: 59	
	City,	State & Zip			
	786-89 Daytime To	07 0879 elephone number			
•	۲ ,				

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

SBRICOURT@AOL.COM

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the	NAME Quisqueya cargo shi corporation shall be:	ipping corp.	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing ac	ldress, if different is:
	3163 NW South River Dr.		Street
	Miami fla	Miramar fl	
	33142	33029	······································
ARTICLE III	DITODOGE		
	which the corporation is organized is:		
	n any and all lawful on-license busi	iness	
	· .		
ARTICLE IV The number of sh	SHARES ares of stock is: 1000		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	rors	
Name and	Title: STEPHANE J BRICOURT President	lent Name and Title:	
Address:	18305 SW 4ZNO STreet	Address:	
	Miramar fl		
	.33029		
Name and	Citle:	Name and Title:	
Address:		4.3.3	
Audi C55.			
	Title:		
Address:		Address:	
		<del></del>	
		<del></del>	
ARTICLE VI	REGISTERED AGENT		
The name and Fl	orida street address (P.O. Box NOT acceptabl	e) of the registered agent is:	
Name:	Stephane J Bricourt		A B TO
Address:	18565 SW 42nd Street		65 20 E
	Miramar fl 33.25		
ARTICLE VII	INCORPORATOR		± ₹
	dress of the Incorporator is:		<b>1 1 1 1 1 1 1 1 1 1</b>
Name:	Stephane J Bricourt		
Address:	18565 SW 42nd Street		₹ <sup>1</sup> <b>3</b>
	Miramar fl 33025		
		<del></del>	
Having been nan	ned as registered agent to accept service of pro	ocess for the above stated corpor	ration at the place designated in
uus cerujicaie, 1 a	im familiar with and accept the appointment as	registered agent and agree to ac	t in this capacity
	To blood ilmi		1
	Required Signature/Registered Agent	<u></u>	Jul 24-10 Date
I submit this doc	ument and affirm that the fucts stated herein	are true. I am aware that the t	alse information submitted in a
document to the L	Department of State Constitutes a third degree fe	elony as provided for in s.817.155	s, F.S.
	HILL Y		
	SCHOUNIUS I INIA	D-	June 24,11
	Required Signature/Incomprator	<del>//</del>	Date