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WILANGE

COVER LETTER

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

SUBJECT: OLGWAIT CONSTITUCTION	ATE NAME - MUST INC	i lide suffix)	
(I NOI OSED CONI OR	TE NAME - MOST INC	LODE BOTTIA)	
Enclosed are an original and one (1) copy of the art	icles of incorporation ar	nd 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 COPY REQUIRED	
FROM: Michael D. Stewart	e (Printed or typed)		
12800 University Dri	•• •		
Fort Myers, FL 3390)7 , State & Zip		M SEP 22
(220) 202 7670		9	# 2

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

Daytime Telephone number

Mike@atlasinconline.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 NAME	1-1: 00 00	1		^
The name of the corporation shall be:	DS Build	nd somh	M T CW	<u> </u>
ARTICLE II PRINCIPAL OPPIC	E	٥	•	
Principal street ad		Mailing address,	if different is:	
12800 University Drive	Suite 420			
Fort Myers, FL 339	307		<u>.</u>	_
				_
ARTICLE III PURPOSE			•	
The purpose for which the corporation is of)	
Professional Corpo	rauon		•	
ARTICLE IV SHARES				
The number of shares of stock is:	000			
<i>5</i> .⊀	AND/OR DIRECTORS			
Name and Title:Michael D. St		me and Title:		
Address: 12800 Universit	y Drive, Suite 420 Ad	dress:		_
Fort Myers, F	1 33907			_
<u> </u>				_
(s				_
Name and Title:		me and Title:		_
Address:	Add	dress:		_
				-
* >				_
Name and Title:	Nar	me and Title:		
Address:		dress:		_
·				_
				_
ARTICLE VI REGISTERED AGE				
The name and Florida street address (P.O Name: Michael D. S	. Box NOT acceptable) of the re	egistered agent is:	S S	•
Address: 1711 SE 1s	t Street		7 T	_
Cape Coral	EI 33000		Man N	-
•	1-1-00330			4
ARTICLE VII INCORPORATOR			76 → 1	Γ
The name and address of the Incorporator		•	N. Carlo	1
Name: Margaret Sh	eehan		20. A	•
	Key Circle, #2521		第5 22	
Fort Myers,	EL_3390/		•	
Having been named gwfegistered agent to	accent service of process for t	the above stated cornoration	at the place decionated	f in
this certificate, I am famillar with and acce	nt the annointment as revistered	d apent and agree to act in the	s emacity	
رائل		88	, j	
			9/7/4	
Barried Cine	ure/Registered Agent		-/- Illin	-
- Kequired Signan	ne registered Agent		Lauc	
submit this document and affirm that th	e facts stated herein are true.	I am aware that the false in	formation submitted in	n a
locument to the Department of State consti			•	
\sim	1	•	α 1 1 α	
a lama et a too	o Mari	•	11 17IN	
- 1 1 V AAN A COM	ature/incomorator		— Total	_