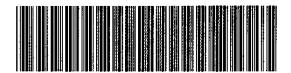
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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FILED 11 OCT 31 AM II: 14 SECRETARY OF STATE



COVER LETTER

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

UBJECT: ABRAHAM INDUSTRI	ES, INC.,	
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
iclosed are an original and one (1) copy of the arti	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 of Status
	ADDITIONAL C	OPY REQUIRED
	(Printed or typed)	
13520 SW 113TH PLAC	Address	
DUNNELLON, FLORID, City,	A 34432 State & Zip	
352-465-2529 Daytime To	elephone number	
grod368@gmail.com E-mail address: (to be used	I 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)

FILED

A			11 007 01
ARTICLE I		RIES INC.,	11 OCT 31 AMII: 14
	•		SECRETARY OF STATE TALLAHASSEE, FLORIDA Tailing address, if different is:
RTICLE II	PRINCIPAL OFFICE		TALLAHASSEE STATE
4	Principal street address	M	lailing address, if different is: "LURIDA
	13520 SW 113TH PLACE	N/A	
1	DUNNELLON, FLORIDA 34432		

RTICLE III	PURPOSE		
	hich the corporation is organized is:		
	NDUSTRIES INC., IS TO PROVID		
WNERS W	HEN THEY USE THEIR PERSON	NAL FINANCES TO	D REPAIR, RESTORE OR
MODIFY THI	EIR EXISTING HOME.		
3			
RTICLE IV	SHARES		
	res of stock is: 1		
	INITIAL OFFICERS AND/OR DIRECT		
Name and 1: Address:	itle: PRESIDENT	Name and Title:_ Address:	
Address:	ALBA RODRIGUEZ	Address:	
	13520 SW 113TH PLACE DUNNELLON, FLORIDA 34432	 -	· · · · · · · · · · · · · · · · · · ·
	DUNINELLON, FLORIDA 34432		•
Name and T	ide:VICE PRESIDENT	Name and Title:_	
Address:	GEORGE RODRIGUEZ	Address:	
	13520 SW 113TH PLACE		
	DUNNELLON, FLORIDA 34432		
Name and T	itle:	Name and Title:	
Address:			
ridaress.			
	REGISTERED AGENT		
e <u>name and Flo</u> Name:	rida street address (P.O. Box NOT acceptable GEORGE RODRIGUEZ	le) of the registered agent	IS:
Name: Address:	13520 SW 113TH PLACE	****	
. 1001033.	DUNNELLON, FLORIDA 3443	32	
TICLE VII	INCORPORATOR		
	Iress of the Incorporator is:		
Name:	GEORGE RODRIGUEZ		
Address:	13520 SW 113TH PLACE	-	
	DUNNELLON, FLORIDA 3443	12	
wing been name	ed as registered agent to accept service of pr	cases for the shows state	ed comparation at the place designated in
	n familiar with and accept the appointment as		
, ,		regenered agein and ag	to a at a some capacity
Luna	Real S S		10/27/2011
1400	Required Signature/Registered Agent		Date
•	requires signature registered Agent		Date
ubmit this docu	ment and affirm that the facts stated herein	are true. I am aware ti	hat the false information submitted in a
umentfo the D	epartment of State constitutes a third degree f	lelony as provided for in s	s.817.155, F.S.
14.	1/ / .		
Muye	KONWYY		10/27/2011
——————————————————————————————————————	Demured Cianature/Incompensor		Date