P11000097816

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Name	e)		
(Document Number)				
Certified Copies		of Status		
Special Instructions to Filing Officer:				
WH-53.	484			

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10/17/11--01025--001 **87.50

SECRETARY OF STATE



144

COVER LETTER

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

SUBJECT: Parlay Live Inc.		
(PROPOSED CORPORA	TË 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 of Status OPY REQUIRED
	ADDITIONAL	OI I REQUIRED
FROM: Anwar Lambert Name	(Printed or typed)	
3970 NW 190n street		
Carol City Florida 33055	Address State & Zip	
954-496-1716 Daytime To	elephone number	
Lambertjohnny28@yaho E-mail address: (fo be used	O.COM I for future annual report	notification)

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



October 18, 2011

ANWAR LAMBERT 3970 NW 190 N STREET CAROL CITY, FL

SUBJECT: PARLAY LIVE Ref. Number: W11000053484

We have received your document for PARLAY LIVE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 311A00023855

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



	' .	and/or Chapter 021, 11.3	FILES
	NAME PARLAY LIVE 106.		11 MOV 10 By
	•		11 NOV 10 PM 4: 25
ARTICLE II	PRINCIPAL OFFICE	V	SECRETA ALCOHOLOGICA
	Principal <u>street</u> address 3970 NW 190 Street	Ma	ailing add SECHAITE FLORIDA
	Carol City Florida 33055		TOHIDA
-			
ARTICLE III	DUBBOGE		
The purpose for v	which the corporation is organized is: Ition is a social networking sight org	ganized to enable i	ndividuals to interact from all
ARTICLE IV The number of sha	SHARES ares of stock is:1000		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	rors	
	Title:Anwar Lambert President		
Address:	3970 NW 190 Street	Address: <u>9</u> 6	607 PARK ROW
	Carol City Florida 33055	В	OCA RATON FLORIDA 33428
Name and T	Title Developed Lembert	Nome and Title	
Address:	Citle: Percival Lambert 3970 NW 190 Street	Address:	-
radi ess.	Carol City Florida 33055		
Name and T	Title:	Name and Title:	
Address:		Address:	
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptabl	e) of the registered agent i	is:
Name:	Anwar Lambert		
Address:	.3970 NW 190 Street		
	Carol City Florida 33055		
	INCORPORATOR		
	<u>dress</u> of the Incorporator is:		
Name:	Anwar Lambert		
Address:	3970 NW 190 Street		
	Carol City Florida 33055		
Having been nam this certificate, I a	sed as registered agent to accept service of pro m familiar with and accept the appointment as	ocess for the above stated registered agent and agr	l corporation at the place designated in ee to act in this capacity
	Lowar F. l		10/14/11
	Required Signature/Registered Agent		Date
I submit this docu document to the D	ument and affirm that the facts stated herein epartment of State constitutes a third degree for	are true. I am aware the	at the false information submitted in a 817.155, F.S.
		1	
	Prwa f	<u> </u>	10/14/11
/	Required Signature/Incorporator		Date