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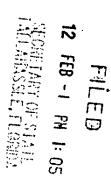
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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COVER LETTER

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

SUBJECT: Freistaat Bayern, Inc.		
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation ar	nd a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
	ADDITIONALC	
FROM: Garret Hutchens	(Printed or typed)	
4630 S. Kirkman Rd., #290		
Α	ddress	
Orlando, FL 32811 City, 9	State & Zip	
321-228-3023 Daytime Te	lephone number	
ghutchens@audiovideoinc.com E-mail address: (to be used	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)

<u>ARTICLE I</u> .NAME. Freistaat Bayern, Inc. The name of the corporation shall be:			
·	FILED		
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing 12 dress [] differentis: 1: 05		
4630 S Kirkman Rd			
#290 Orlando, FL 32811	SECRETARY OF STATE		
ARTICLE III PURPOSE			
The purpose for which the corporation is organized is:			
Export and Import of products to and from Europe.			
ARTICLE IV SHARES			
The number of shares of stock is: 100			
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR	s		
Name and Title: Garret Hutchens, C.E.O	Name and Title:		
Address: 4630 S. Kirkman Rd. #290	Address:		
Orlando, FL 32811			
Name and Title:	Name and Title:		
Address:			
Name and Title:	Name and Title:		
Address:	Address:		
			
ARTICLE VI REGISTERED AGENT			
The name and Florida street address (P.O. Box NOT acceptable) of	the registered agent is:		
Name: Garret Hutchens Address: 4630 S Kirkman Rd., #290	-		
Orlando, FL 32811	- -		
ARTICLE VII INCORPORATOR			
The <u>name and address</u> of the Incorporator is: Name: <u>Garret Hutchens</u>			
Address: 4630 S Kirkman Rd., #290 Orlando, FL 32811			
<u>Orlando, FL 32811</u>	-		
Having been named as registered agent to accept service of process	for the above stated corporation at the place designated in		
this certificate, I am familiar with and accept the appointment as regi	stered agent and agree to act in this capacity		
1 Etch	[/ 3 (p		
Required Signature/Registered Agent	Date		
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a			
document to the Department of State constitutes a third degree felony	as provided for in s.817.155, F.S.		
	430/12		
Required Signature/Incorporator	\ Date\		