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02/08/12--01019--019 **70.00

COVER LETTER

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

SUBJECT: ERNESTO CUEVAS IN	NC	
(PROPOSED CORPORA	TE 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 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
	ADDITIONALC	OI I REQUIRED
FROM: ERNESTO CUEVAS INC Name	(Printed or typed)	
4912 REECE RD	Address	
PLANT CITY, FL 33566		
813-703-7448 Daytime Te	elephone number	
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)

ARTICLE I The name of the cor	NAME ERNESTO CUEVAS IN poration shall be:	NC	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing ac	Idress, if different is:
	912 REECE RD		
P	LANT CITY, FL 33566		
-			
	PURPOSE		
	nich the corporation is organized is:		
FLOORING A	ND MISC REPAIRS		
ARTICLE IV	CUADEC		
The number of share			
	INITIAL OFFICERS AND/OR DIRECTO		
Name and 11t Address:	le: <u>ERNESTO CUEVAS - PRES</u> 4912 REECE RD		
Address:	PLANT CITY, FL 33566		
	le:	Name and Title:	
Address:			
			• • •
	le:		
Address:	·	Address:	
			
	REGISTERED AGENT		
	ida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name: Address:	ERNESTO CUEVAS 4912 REECE RD		. (37 0)
Address.	PLANT CITY, FL 33566	_	72
	,		召 響
	INCORPORATOR		田 養曜
	ress of the Incorporator is:		a 532
Name: Address:	ERNESTO CUEVAS		
Address.	4912 REECE RD PLANT CITY, FL 33566	_	A CONTRACTOR
	1	_	**
	d as registered agent to accept service of proce		
this certificate, I am	familiar with and accept the appointment as re	gistered agent and agree to a	et in this capacity
50 -+			4//-
Smess	Required Signature/Registered Agent	· · · · · · · · · · · · · · · · · · ·	2/1/12
-	Required Signature/Registered Agent		Date
I submit this docum	nent and affirm that the facts stated herein ar	e true. I am aware that the	false information submitted in a
	partment of State constitutes a third degree felo		
D.			1 .
5 mesto	Cueros		2/11/12
	Required Signature/Incorporator		Date