(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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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: ASSet - Hunter =	TVC. NAME-MUSTINCI	LUDE SUFFIX)		-	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:					
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Cop & Certificate Status		•	
	ADDITIONAL CO		· _]		
FROM: <u>Henneth Turner</u> Name (Printed or typed)					
1280 N.V. 18/st	ress		12 MAR	SECRE SECRE	
Miami, Fl. City, Stat		9	-5 PM	FILED FILED	
(786) 203-58 Daytime Telep		1.com	2: 53	STATE IRATIONS	
E-mail address: (to be used for	r future annual report	notification)			

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 a	and/or Chapter 621, F.S. (Profit)
The name of the corporation shall be: ASSet - Hun-	SECRETARY OF STATE JIVISIEN OF CORPORATIONS 12 MAR - F. DM 2. 50
PRINCIPAL OFFICE Principal street address N.V. 18 S. F. Miami, Fl. 33169	12 MAR -5 PM 2: 53 Mailing address, if different is:
ARTICLE III PURPOSE The purpose for which the corporation is organized is: To help Hose who have unclined fective there. Money,	aimed funds,
ARTICLE IV SHARES The number of shares of stock is:	•
	Name and Title: Address:
Name and Title:Address:	Name and Title: Address:
Name and Title: Address:	Name and Title:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) Name: Kenneth Turner Address: 1280 NV 1815+ Miami, Fl 33169) of the registered agent is:
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Menneth Turner	<u></u>
Having been named as registered agent to accept service of pro- this certificate, I am familiar with and accept the appointment as	
Required Signature/Registered Agent	3-1-2012 Date
I submit this document and affirm that the facts stated herein document to the Department of State constitutes a third degree fell	are true. I am aware that the false information submitted in a lony as provided for in s.817.155, F.S.
Required Signature/Incorporator	Date