## P120000330313

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
<u></u>	WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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12 MAR 28 PH I2: 04 SECRETARY OF STATE FALL AHASSEE, FLERIEF

MRD 3/29/12

## **COVER LETTER**

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

SUBJECT: DESRON - 37 Inc.		
(PROPOSED CORPORAT	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	les 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
mark i servicio di territorio di conserva	ADDITIONAL C	OPY REQUIRED
	(Printed or typed)	<u> </u>
1290 Arlington Place	ddress	<del></del>
Winter Park, FL 32789	State & Zip	
407-645-3592  Daytime Te	lephone number	
despardr@yahoo.com E-mail address: (to be used	for future annual report	notification)

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

The second of the companies of the second

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

ARTICLE I N The name of the corp	Oration shall be:		
ARTICLE II P	PRINCIPAL OFFICE		Specific Compact
	Principal street address		Mailing address, if different is:
12	90 Arlington Place	same	
<b>₩</b> ii	nter Park, FL 32789		
_			
ARTICLE III P	URPOSE ch the corporation is organized is:		
	purchase and sale of military and	naval memora	abilia المحمد
ARTICLE IV S	•		abilia. TALLAHASSEE FLAME
he number of shares			70, 73
			<b>1</b> 2
	NITIAL OFFICERS AND/OR DIRECTO		
	:Ronald A. Despard, President		e:
Address:	1290 Arlington Place	Address:	
	Winter Park, FL 32789		
٠	. •		
Name and Title	e: familie and and a familie for the familie f		e:
Address:		Address:	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<del></del>	
Name and Title	ə:	Name and Titl	۵۰
Address:	J	Address:	
Tiddi Cob.			
	EGISTERED AGENT	- C4h	4 :
Name:	da street address (P.O. Box NOT acceptable)		ent is:
Address:	Ronald A. Despard  1290 Arlington Place	•	
Addiess.	Winter Park, FL 32789		
	Willes Faik, L 52705		•
	NCORPORATOR		
he <u>name and addr</u>	ess of the Incorporator is:		
Name:	Ronald A. Despard		
Address:	1290 Arlington Place	<u>—</u>	
	Winter Park, FL 32789		
	as registered agent to accept service of proceedings of the appointment as references.		
Barre	If G Selend		March 19, 2012
To Colle	Required Signature/Registered Agent		Date
	" Lindarion Distriction of Magneter Walnut	SWE SHITE SHE IN	LIVE TO A STORY
	ent and affirm that the facts stated herein a		
	artment of State constitutes a third degree felo		
1	$O M \longrightarrow I$	1	
El ora	NO VI VESPORE	<u>//</u>	March 19, 2012
<u> </u>	Required Signature/Incorporator		Date