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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	
(, , , , , , , , , , , , , , , , , , , ,	.,
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Carliffied Carlina	O - Alfin - b -	-4 Olahar
Certified Copies	_ Certificates	s or Status
Special Instructions to	Filing Officer:	
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	Office Use On	ly



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ECRETARY OF STATE

T. Buren JUL & 2 2012.

COVER LETTER

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

SUBJECT: Unique Boutique & Mo	ore Inc.	,
(PROPOSED CORPORA	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the art	icles of incorporation an	d a check for:
,		•
\$70.00 \$78.75	\$78.75	\$87.50
☐ Filing Fee ☐ Filing Fee	Filing Fee	□Filing Fee,
& Certificate of Status	& Certified Copy	Certified Copy
		& Certificate of
		Status
	ADDITIONAL C	OPY REQUIRED
FROM: Iwona Beata Wajszczak	- (D-:-4-11)	.
Nam	e (Printed or typed)	
EGG1 Ockobiro Avo	~	•
5661 Oakshire Ave.	Address	
Sarasota FL. 34233		
City.	State & Zip	· · · · · · · · · · · · · · · · · · ·
•	•	
941 685-3290		
Daytime 7	Telephone number	
<u>iwmaso8@comcast.net</u>		
E-mail address: (to be use	a for future annual report	notification)

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

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

ARTICLE II	PRINCIPAL OFFICE		
.	Principal street address	-	ldress, if different is:
<u> 5</u> 0	661 Oakshire Ave.	same	
.	arasota FL. 34233		
ARTICLE III	PURPOSE		
	ich the corporation is organized is:		
designing, alte	eration and selling clothes and	accessories.	To t
			FIL JUN 29 CRETAR: LAHASS
			F1L 129
RTICLE IV			E PA
he number of share	es of stock is:10000		
RTICLE V	INITIAL OFFICERS AND/OR DIRE	CTORS	ST 5
	le: Iwona Beata Wajszczak (pre		<u> </u>
Address:	5661 Oakshire Ave.	Address:	
	Sarasota FL 34233		
			
Name and Tit	le:	Name and Title:	
Address:		Address:	
Name and Tit	le:	Name and Title:	
Address:		Address:	
ARTICLE VI	REGISTERED AGENT		
	ida street address (P.O. Box NOT accept	able) of the registered agent is:	
Name:	lwona Beata Wajszczak		
Address:	5661 Oakshire Ave		
	Sarasota FL 34233		
RTICLE VII	INCORPORATOR		
	ress of the Incorporator is:		
Name:	Iwona Beata Wajszczak		
Address:	5661 Oakshire Ave. Sarasota FL. 34233		
	Sarasota FL 34233		
Iavina hoon name	d as registered agent to accept service of	neocoss for the above stated corno	ration at the place designated in
	familiar with and accept the appointmen		
	_		
Mila	Required Signature/Registered Age	rano	6/26/201
	Required Signature/Registered Age	ent	Date
/			_
	nent and affirm that the facts stated her		
ocument to the Dep	partment of State constitutes a third degree	e jeiony as provided for in s.817.15.	5, F.S.
11/0	Required Signature/Incorporato	_	6/26/201