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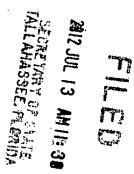
(Re	questor's Name)	
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(Do	cument Number)	
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COVER LETTER

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

SUBJECT: Bulldog Ecommerce, In	C			
(PROPOSED CORPORA)	ΓΕ NAME – <u>MUST INC</u>	<u>LUDE SUFFIX</u>)		
Enclosed are an original and one (1) copy of the artic	les of incorporation ar	nd 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		
	ADDITIONAL C	OPY REQUIRED		
FROM: Lee Joseph III Castagnos				
Name	(Printed or typed)			
4001 Corrine Dr.				
Α	ddress	Z _s		
Orlando, FL 32814	tate & Zip	LAHAS	#12 JUL 13	***************************************
407-506-7445				Pon
Daytime Te	lephone number	- 17 - 17	1	E a i
ccastagnos@gmail.com E-mail address: (to be used	for future annual report	notification)	යා ම	* 0 <u>85</u> ,8**

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 N	IAME Rulldog Ecommerce Ir		
The name of the corp	—— Dulluuu Luuminelle ke n	nc	
·			
ARTICLE II P	PRINCIPAL OFFICE	\$ 4-11to	34 '6' 4'.66'4 '
400	Principal street address O1 Corrine Dr.	Mailin	g address, if different is:
	ando, FL 32814		
<u> </u>	alluo, FL 32014		
			
ARTICLE III PI			
	ch the corporation is organized is: ss, Online sales and marketing		
internet pusine	ss, Online sales and marketing		
ARTICLE IV S	UADIO		
The number of shares			
The number of shares	of stock is, i ooo		
	NITIAL OFFICERS AND/OR DIRECTO		
	:Lee Joseph III Castagnos, Preside		
Address:	4001 Corrine Dr.		
	Orlando, FL 32814		
		_	
Name and Title	:	Name and Title:	
Address:			
Name and Title		Name and Title	
Address:	<u> </u>		
riddiess.			
		_	
	EGISTERED AGENT	Cal ta 1	7.0 m
Name:	la street address (P.O. Box NOT acceptable)		
Address:	Lee Joseph III Castagnos 4001Corrine Dr		≥≋ ⊆ ~~
Addicas.	Orlando, FL 32814		55 – 1
	33161100, 1 5 02017		\$ E E E
	<u>NCORPORATOR</u>		
	ss of the Incorporator is:		
Name:	Lee Joseph III Castagnos		
Address:	4001 Corrine Dr. Orlando, FL 32814	_	
	Onanuo, FL 32614		5
Having been named	as registered agent to accept service of proce	ss for the above stated co	rporation at the place designated in
this certificate, I am f	amiliar with and accept the appointment as re	gistered agent and agree to	o act in this capacity
0	100 -		. /2 / 2
10	1 alan II		6/29/12 thata
	Required Signature/Registered Agent		i ⊅ate
	-		, , , , , , , , , , , , , , , , , , , ,
i Submit this docume	ent and affirm that the facts stated herein are	e true. I am aware that to	ne jaise information submitted in a
искитень ю те нера	urtment of State constitutes a third degree felor	ny as proviaea jor in s.81/	.133, F.S.
٩	S. I GOLDONA		6/29/17
	Required Signature/Incorporator		6/29/12 /Date
			1200