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COVER LETTER

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

SUBJECT: OWENS FARMS INC.		
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
•		
Enclosed are an original and one (1) copy of the arti	cles of incorporation ar	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
	ADDITIONAL C	OPY REQUIRED
P.O. BOX 1424	(Printed or typed)	
	Address	
MACCLENNY, FL 3206 City,	3 State & Zip	·
904-259-8256 Daytime T	elephone number	<u> </u>
joyyesjoy@gmail.com E-mail address: (to be used	d for future annual report	notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 25, 2012

MARTIN OWENS PO BOX 1424 MACCLENNY, FL 32063

SUBJECT: OWENS FARMS INC. Ref. Number: W12000029047

We have received your document for OWENS FARMS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 612A00015279

Articles of Incorporation

Owens Quality Of Owens Farms Inc.

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

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following articles of incorporation:

Article One

Name

The name of the corporation is OWENS FARMSTARE. Quality Farms Inc.

Article Two

Principal Place of Business & Mailing Address

The principal office of this corporation in the State of Florida is physically located at 6082 SW 55th Avenue; Jasper, Florida 32052. The corporate mailing address is P.O. Box 1424; Macclenny, Florida 32063. The Board of Directors may from time to time move the principal office to any other address in Florida.

Article Three Purpose or Purposes

This corporation is organized for the purpose of engaging in any activity or business permitted under the laws of the United States and the State of Florida.

Article Four Capitalization

The aggregaate number of shares which the corporation is authorized to issue to 100. Such shares shall be of a common class, and shall have a par value of ONE DOLLAR (\$1.00) per share or be without par value.

Article Five Directors

The number of directors constituting the initial board of directors of the corporation is one. The name and address of each person who is to serve as a member of the initial board of directors are:

Name & Title:

Address:

Martin Owens, President

P.O. Box 1424; Macclenny, FL 32063

Article Six

Registered Agent

The Name and Florida street address of the initial Registered Agent is:

Name:

Address

Martin Owens

6082 SW 55th Avenue; Jasper, FL 32052

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

MARTIN OWENS

REGISTERED AGENT

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BIVISION OF CORPORATIONS

Article Seven Incorporators Names and Addresses

IN WITNESS WHEREOF, the undersigned, being the incorporator of the coporation, has executed these Articles of Incorporation this twenty-second day of May, A.D. 2012. I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Name & Date:

Address:

Martin Owens

6082 SW 55th Avenue; Jasper, FL 32052

Article Eight Effective Date

The effective date of this corporation is May 28, 2012.

STATE OF FLORIDA)

: s.s.

COUNTY OF BAKER)

THE FOREGOING INSTRUMENT was acknowledged before me this 22 day of May, A.D., 2012 by Martin Owens, who are personally known to me or who have produced

as identification.

Notary Public, State of Florida

Notary Commission Expiration Date

12/25/15

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SECRETARY OF STATE