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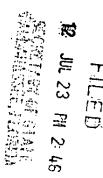
(Requestor's Name)		
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PICK-UP WAIT	MAIL		
(Business Entity Na	ame)		
(Document Number)			
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COVER LETTER

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

SUBJECT: Andrew Hoek, P.A.		
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u> I	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles 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
	ADDITIONAL CO	OPY REQUIRED
FROM: Andrew Hoek Name	(Printed or typed)	
607 W Bay Street		
, A	Address	
Tampa, Florida 33629 City, S	State & Zip	<u></u>
813-690-5650 Daytime Te	elephone number	
andrewkhoek@gmail.cor E-mail address: (to be used	n for future annual report	notification)

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	NAME Andrew Hoek, P.A	FILED
The name of the	corporation shall be:	B JUL 23 PM 2: 45
ARTICLE II	PRINCIPAL OFFICE	The state of the s
•	Principal street address	Mailing address, if different is:
	607 W Bay Street	
	Tampa, Florida 33629	Committee & American
PTICLE III	PURPOSE	
	r which the corporation is organized is:	
Real estate	e sales	
<u>ARTICLE IV</u>		•
he number of s	shares of stock is: 1	
RTICLE V	INITIAL OFFICERS AND/OR DIRECT	TORS
Name and	Title:Andrew Hoek	Name and Title:
Address:	Title:Andrew Hoek 3009 W Grovewood Ct	Address:
	Unit C	
	Tampa, Florida 33629	
Name and	Title:	Name and Title:
Address:	The.	
Addiess.		
Name and	Title:	Name and Title:
Address:		Address:
RTICLE VI	REGISTERED AGENT	
he <u>name and l</u>	Florida street address (P.O. Box NOT acceptab	le) of the registered agent is:
Name:	Andrew Hoek	
Address:	607 W Bay Street	
	Tampa, Florida 33629	
RTICLE VII	I INCORPORATOR	•
he <u>name and a</u>	address of the Incorporator is:	
Name:	Andrew Hoek	
Address:	607 W Bay Street	 _
	Tampa, Florida 33629	
avina heen na	med as registered agent to accent service of ne	rocess for the above stated corporation at the place designated i
is certificate, I	I applantlide with and accept the appointment a	ocess for the above stated corporation at the place designated t is registered agent and agree to act in this capacity
//		/ A
	Mell & col	7/2 1/2
	Required Signature/Registered Agent	Date Page
		
submit this de	ocument and affirm that the facts stated hereir	n are true. I am aware that the false information submitted in
ocument to the	e Departmentfof State constitutes a third degree ;	felony as provided for in s.817.155, F.S.
/ //	/	7/25/12
	$OOV \times II - II$	~///