P1200075208

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2012

ROSA S JOHNSON 831 NW 7 AVE #102 MIAMI, FL 33136

SUBJECT: C&C TAX PROFESSIONALS

Ref. Number: W12000042853

We have received your document for C&C TAX PROFESSIONALS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return 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.

Pamela Smith Regulatory Specialist II

Letter Number: 512A00021145

COVER LETTER

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

SUBJECT: C&C TAX PROFESSIONALS				
	(PROPOSED CORPORA	TE 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 Filing Fe	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
		·		
FROM:	ROSA S JOHNSON Name	e (Printed or typed)		
	831 NW 7 AVE #102	Address		
!	MIAMI,-FL 33136 City,	State & Zip		
	7864581346 Daytime 7	elephone number		
ROSAJOHNSON935@YAHOO.COM E-mail address: (to be used for future annual report notification)				

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

ARTICLES OF INCORPORATION

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

ARTICLE I The name of the con	NAME C&C TAX PROF	ESSIONALS, INC	. × ⁶ v
ARTICLE II	PRINCIPAL OFFICE		
8	Principal <u>street</u> address 31 NW 7 AVE #102 IIAMI, FL 33136	Mailing addre	ss, if different is:
ARTICLE III	PURPOSE		
The purpose for wl			
ARTICLE IV The number of shar	<u>SHARES</u>		
	INITIAL OFFICERS AND/OR DIS		
	tle:ROSA S. JOHNSON, DIREC		
Address:	831 NW 7 AVE #102 MIAMI, FL 33136		· · · · · · · · · · · · · · · · · · ·
	IVIIAIVII, FL 33 130		,
		Name and Title:	
Address:		Address:	
			
		Name and Title:	· · · · · · · · · · · · · · · · · · ·
Address:		Address:	
			2 58
	REGISTERED AGENT		ECRETAR SION OF C
	ida street address (P.O. Box NOT acce ROSA S. JOHNSON		3 95 F
Address:	831 NW 7 AVE #102		一 c27c
	MIAMI, FL 33136		그 중유급
			₽ GRS
	INCORPORATOR		
Name:	ress of the Incorporator is: ROSA S. JOHNSON		5 2
Address:	831 NW 7 AVE #102		ਦੀ -
11001035.	MIAMI. FL 33136		
	d as registered agent to accept service of familiar with and accept the appointment	of process for the above stated corporation of process for the above stated corporation of the corporation o	
(d-or	sa Vohnaci	_	8 28 12
- 01	Required Signature/Registered A	gent	Date
	nent and affirm that the facts stated h	erein are true. I am aware that the falso ree felony as provided for in s.817.155, F	
C	1		alaala
_ Lonio	Required Signature/Incorporate	er de la la companya de la companya	0128117
1.	4 · Madauran pigunnan Amérikan	···	Date