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(Re	questor's Name)	
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(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STATE
THE PROPERTY OF STATE

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COVER LETTER

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

SUBJECT: BRIAN STANLEY INC.		
(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 \$78.75 Filing Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,
& Certificate of Status	& Certified Copy	Certified Copy
		& Certificate of
	ADDITIONAL C	Status OPY REQUIRED
	ADDITIONAL C	OF I REQUIRED
FROM: BRIAN STANLEY	e (Printed or typed)	
Nam	e (Finited of typed)	
14359 MIRAMAR PK	NY # 411	· ·
	Address	
MIRAMAR, FL 33027	7	•
IVIITAIVIAH, FL 33027 City	, State & Zip	
		•
917 400 9171	Telephone number	
Dayume	reiephone number	
B.STANLEY@MIMGO	DNLINE.COM	
E-mail address: (to be use	ed for future annual repor	t nouncation)

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 BRIAN STANLEY I The name of the corporation shall be:	NC. FILED
•	12 OCT 16 AH 10: 28
ARTICLE II PRINCIPAL OFFICE	— -
Principal <u>street</u> address 14359 MIRAMAR PKWY	Mailing address if different is:
# 411	TALLAHASSEE, FLORMA
MIRAMAR, FL 33027	
	· · ·
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is: MUSIC PRODUCTION	
MOSIC PRODUCTION	
ADVICED IV CHADES	
ARTICLE IV SHARES The number of shares of stock is:100	
The number of shares of stock is. 100	
ARTICLE V INITIAL OFFICERS AND/OR DIRECT	<u>CTORS</u>
Name and Title: BRIAN STANLEY	Name and Title:
Address: 14359 MIRAMAR PKWY # 4	
MIRAMAR, FL 33027	
Name and Title:	Name and Title:
Address:	Address:
	Name and Title:
Address:	Address:
	······································
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT accepta	ble) of the registered agent is:
Name: BRIAN STANLEY Address: 1/350 MIRAMAR PKWY	
Address: 14359 MIRAMAR PKWY #	
WIIDAWAD, FL 33UZI	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	•
Name: BRIAN STANLEY	
Address: 14359 MIRAMAR PKWY # MIRAMAR, FL 33027	411
Howing hear named as registered agent to assent service of a	process for the above stated corporation at the place designated in
this certificate, I am familiar with and accept the appointment	orocess for the above stated corporation at the place designated in
- S	us regissered agent una agree to tax in ints capacity
\mathbb{R}^{2} ,	10/2/12
Required Signature/Registered Ager	T C T C
rodunor pignamo registero Ager	Date Date
I submit this document and affirm that the facts stated here	in 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.
B V	i 1
88	10/12/12
Required Signature/Incorporator	Date