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(Re	questor's Name)	····
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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TALLAHASSEE FLORIDA

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COVER LETTER

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

_{SUBJECT:} Do	It Your Own Way		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
		e (Printed or typed)	
<u> </u>	380 NW 24 Terra	ACE Address	
<u>F</u>	ort Lauderdale, F	FL 33311	
98	54 557 4715	State & Zip	
	Daytime 1	Celephone number	
<u>dc</u>	bityourownwayinc@ E-mail address: (to be use	gmail,com ed 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)

	me of the corporation shall be: Do It Your Own Way Inc CLE II PRINCIPAL OFFICE Principal street address Mailing address, if diffe O NW 24 Terrace		Idress, if different is:		
Fort Lauder	dale, FL 33311				
ARTICLE III PURPOSE The purpose for which the corporation is organized is: The corporation shall provide services and or merchandise and shall conduct a and all legal business as determined by it's Directors.					
			. r.,		
			SECRETAL SHANS		
ARTICLE IV S. The number of shares	HARES of stock is: 1500		PH 3: 37 FOR STATE FEET LORIDA		
	Sydney Brown, President/Director 1880 NW 24 Terrace	Name and Title:			
Name and Ti	Fort Lauderdale FL 3331				
Address	1880 NW 24 Terrace Fort Lauderdale, FL 3331	Address:			
Name and Ti	Sydney Brown, Treasurer 1880NW 24 Terrace	Address:			
	Fort Lauderdale, FL3331	<u> </u>	And Park Control of the Control of t		

Name and	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI The name and FI Name: Address:	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of Sydney Brown 1880 NW 24 Terrace	Fithe registered agent is:	3
ARTICLE VII	Fort Lauderdale, FL 33311 INCORPORATOR	SSEE FLORIC	8 PM 3: 37
The <u>name and ad</u>	Idress of the Incorporator is:	<i>></i> ***	_
Name:	Sydney Brown	-	
Address:	1880 NW 24 Terrace	-	
Having been nan this certificate, I d	Fort Lauderdale, FL 33311 ned as registered agent to accept service of process am familiar with and accept the appointment as reg	- for the above stated corporation at the place	,
	Required Signature/Registered Agent	Da	
I submit this doc document to the I	nument and affirm that the facts stated herein are a Department of State constitutes a third degree felong	true. I am aware that the false information :	submitted in d
	Required Signature/Incorporator		ate