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COVER LETTER

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

SUBJECT: MU	RPH'S MARKETI (PROPOSED CORPORA)	NG.INC.	
50202011 <u>-10</u>	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles 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 COPY REQUIRED	
FROM:	RYSTAL MARII	F MURPHY (Printed or typed)	
	287 WEST RO	AD ddress	
**************************************	Ocoee, FL	34761 State & Zip	
**************************************	843 - 46 Daytime Te	6 - 0000 elephone number	
	CRISTAL MURD E-mail address: (to be used	HY 81@GMA for future annual report i	otification)

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)

The name of the corporation shall be: MURPH'S MA	IRKETING, INC.
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
287 WEST ROAD	607 SPICETRADER WA
Ocoee, FL	APT. G
34761	DRIANDO, FL 32818
ARTICLE III PURPOSE The purpose for which the corporation is organized is: F	DR PROFIT COMPANY
IN MARKETING SALES	
<u>. </u>	
	2
ARTICLE IV SHARES The number of shares of stock is: \\ \text{O}	ARY ASSE
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: CRYSTAL M. MURPHY (PRESIDENT)	Name and Title:
Address LOOT SPICE TRADER WAY	Address:
APT G	
DRUANDO, FL 32818	
Name and Title:	Name and Title:
Address	Address:
Name and Title:	Name and Title:
Address	Address:

ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: CRISTAL M. MURPHY Address: LOO SPICE TRODER WAY APT. CI ORUANDO FL 32818 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: CRISTAL M. MURPHY Address: LOO SPICETRADER WAY APT G ORUANDO FL 32818 Having been named as registered agent to accept service of process for the above stated corporation at the place de this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent Date	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: CRYSTAL M. MURPHY Address: LOOT SPICE TRODER WAY APT. G. ORUANDO FL 32818 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: CRYSTAL M. MURPHY Address: GOT SPICETRADER WAY APT G. ORUANDO FL 32818 Having been named as registered agent to accept service of process for the above stated corporation at the place de this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	
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Required Signature/Registered Agent Date	
Required Signature/Registered Agent Date	13
required Signification (Signification Signification Signif	
I submit this document and affirm that the facts stated herein are true. I am aware that the false information sub document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	mitted in a
	-13
Regard Signature/Incorporator Date	