## 7300074/59

(Requestor's Name)				
,				
(Address)				
(Address)	·			
(City/State/Zip/Phone	#)			
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
, ,				
Certified Copies Certificates	of Status			
Special Instructions to Filing Officer:				
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Office Use Only



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13 SEP -6 AM 8: 26 SECRETARY OF STATE

Ps 9/11/13

## **COVER LETTER**

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

SUBJECT: Molly P	. Incorporate	d	
		ATE NAME – <u>MUST INCLU</u>	JDE SUFFIX)
Enclosed are an original and	d one (1) copy of the ar	ticles of incorporation and	a check for:
Filing Fee Filin	78.75  g Fee ertificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
		ADDITIONAL CO	PY REQUIRED
PROM.	el Faust Nam 2 NW 69th P	e (Printed or typed)	
		Address	
Parkla	and, FL 3307		
054.9	City 317-6472	, State & Zip	
904-0		Telephone number	
	e.faust@att.net E-mail address: (to be us	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)

RTICLE I NA e name of the corpor RTICLE II PR	INCIPAL OFFICE		12 000 -	
KIICLE II FR	Principal street address	!	Mailing address, if different is: 6 AM 8	
0602 NW 69	th Place	SECRETARY OF ST TALLAHASSEE, FLO		
arkland, FL	33076-2968			
RTICLE III PUI e purpose for which	RPOSE Hold Inve	stments suc	h as Real Estate, Bonds, etc	
·				
RTICLE IV SH	ARES 500,000			
RTICLE IV SH e number of shares o	ARES f stock is: 500,000			
RTICLE V IN	TIAL OFFICERS AND/OR DIRECTOR		David D. Faust Tagasana	
RTICLE V IN	<i>TIAL OFFICERS AND/OR DIRECTORS</i> le: Joanne Faust, President		Daniel R. Faust, Treasurer	
RTICLE V IN	TIAL OFFICERS AND/OR DIRECTORS  Joanne Faust, President  10602 NW 69th Place		10602 NW 69th Place	
Name and Tit	<i>TIAL OFFICERS AND/OR DIRECTORS</i> le: Joanne Faust, President	Name and Title:	10602 NW 69th Place	
Name and Tit Address	TIAL OFFICERS AND/OR DIRECTORS Joanne Faust, President 10602 NW 69th Place Parkland, FL 33076-2968	Name and Title: Address:	10602 NW 69th Place Parkland, FL 33076-2968	
Name and Tit  Address  Name and Titl	TIAL OFFICERS AND/OR DIRECTORS Joanne Faust, President 10602 NW 69th Place Parkland, FL 33076-2968	Name and Title: Address: Name and Title:		
Name and Tit Address	TIAL OFFICERS AND/OR DIRECTORS le: Joanne Faust, President 10602 NW 69th Place Parkland, FL 33076-2968  Natalie Faust, Director	Name and Title: Address:	10602 NW 69th Place Parkland, FL 33076-2968	
Name and Tit  Address  Name and Titl	TIAL OFFICERS AND/OR DIRECTORS Joanne Faust, President 10602 NW 69th Place Parkland, FL 33076-2968  Natalie Faust, Director 10602 NW 69th Place	Name and Title: Address: Name and Title:	10602 NW 69th Place Parkland, FL 33076-2968	
Name and Tit Address  Name and Titl Address	TIAL OFFICERS AND/OR DIRECTORS Joanne Faust, President 10602 NW 69th Place Parkland, FL 33076-2968  Natalie Faust, Director 10602 NW 69th Place	Name and Title: Address: Name and Title: Address:	10602 NW 69th Place Parkland, FL 33076-2968	

Name and Address	i Title:	Name and Title: Address:	FILED  13 SEP -6 AM 8: 26  SECRETARY OF STATE TALLAHASSEE, FLORID;
ARTICLE VI The name and Flo	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of Joanne Faust	the registered agent i	is:
Address:	10602 NW 69th Place Parkland, FL 33076-2068		
ARTICLE VII The name and ad Name:	INCORPORATOR  Idress of the Incorporator is:  Daniel R. Faust		
Address:	10602 NW 69th Place Parkland, FL 33076-2968		
this certificate, I a	ned as registered agent to accept service of process am familiar with and accept the appointment as reg		
(AC	Janne Yaust		09/03/2013
()	Required Signature/Registered Agent	<del> </del>	Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon		
X/.:	1 Kom		09/03/2013
106	Required Signature/Incorporator	<del></del>	Date