P130000 94602

| (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: Mark South GAVE AUTHOHIZATION BY PHONE TO COHRECT Low (P) DATE 1//2//3 DOC. EXAM |

Office Use Only



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SECRETARY OF STATE OF STATE OF CORPORATION OF CORPORATION

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| v v | COVE | R LETTE | EIR | |
|--|---|--------------|------------------|--|
| Department of State New Filing Section Division of Corporat P. O. Box 6327 Tallahassee, FL 323 | | | | |
| SUBJECT: USFundraising Corp (PROPOSED CORPORATE NAME - | | | | |
| | (PROPOSED CORPORA | IE NAME - | MUSTINGL | ODE SUPPLY) |
| Enclosed are an orig | inal and one (1) copy of the arti | cles of inch | rporation and | l a check for: |
| S70.00 Filing Fee | ■ \$78.75 Filing Fee & Certificate of Status | | Fee fied Copy | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |
| FROM: | lark South | | | |
| 70 | 010 Sunnybrook | | typed) | |
| E | nglewood, FL 34 | | | |
| 1- | City, -800-543-4371 | State & Zip | | |
| se | Daytime To | sing card | ds.com | 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)

| ARTICLE I NAME The name of the corporation shall be: USFundraising Cor | DIVISION OF CORPORATION |
|--|--|
| ARTICLE II PRINCIPAL OFFICE Principal street address 7010 Sunnybrook Blvd | Mailing address, if different is: PM 2: 17 |
| Englewood, FL 34224 | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any and To have an incorporation start date of 0 | all lawful business /01/2014 |
| | |
| | |
| | |
| | |
| | |
| ARTICLE IV SHARES The number of shares of stock is: 100,000,000 | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS | i n |
| | Name and Title: |
| 7010 Sunnybrook Blvd Englewood, FL 34224 | Address: |
| Englewood, LE 34224 | |
| | |
| 1 | Name and Title: |
| Address | Address: |
| | |
| No. 1 Table | Manager I Tide |
| | Name and Title: |
| Addition | |
| | |

FILED SECRETARY OF STATE DIVISION OF CORFORATION Name and Title: Name and Title: 2013 NOV 20 PH 2: 17 Address Address: REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the fegistered agent is: Mark South Name: 7010 Sunnybrook Blvd Address: Englewood, FL 34224 INCORPORATOR ARTICLE VII The name and address of the Incorporator is: Mark South Name: 7010 Sunnybrook Blvd Address: Englewood, FL 34224 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 11/18/13 Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third Segree felony is provided for in s.817.155, F.S. 11/18/13 Date