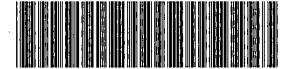
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(Re	questor's Name)
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PICK-UP	WAIT MAIL
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Certified Copies	_ Certificates of Status
Special Instructions to	Filing Officer:
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## **COVER LETTER**

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

SUBJECT:	JM Fabriz	TO INC.  ATE NAME - MUST INCL	
	(PROPOSED CORPORA	TE NÁME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation an	d a check for:
	(,, cop, c, a.c		a di cincoli ipri
\$70.00	<b>1</b> \$78.75 .	□ \$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
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rkowi	Joseph M. F	(Printed or typed)	
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	727-64	2-9001	
	Daytime T	elephone number	
	TTF.1.	1-120 Varie	ean not
	TJFabriz E-mail address: (to be use	d 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)

ARTICLE II PRINCIPAL OFFICE Principal street address		Mailing address,	if different	ie.	
<u> </u>					
		1.0.130	30.	<u></u>	
New Port Richey, FI	34652	Elters,	FI.	34	680
ARTICLE III PURPOSE	_				
The purpose for which the corporation is organized is:	to manufac	ture + s	e11 a	me	dic
product.					
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The number of shares of stock is: / O O O	CTOPS				
The number of shares of stock is: 1000  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title: Joseph M. Fabrizio,	CLO Name and Titl	e:			
Name and Title: Joseph M. Fabrizio, Address 7227 Garden Gr	Name and Title	e:			
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The number of shares of stock is: 1000  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title: Joseph M. Fabrizio,  Address 7227 Garden Gr	Name and Title	e:			
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The number of shares of stock is: 1000  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title: Joseph M. Fabrizio,  Address 7227 Garden Gr  New Port Richey	Name and Title Processing Sucretary Name and Title Office Name and Title				
The number of shares of stock is: 1000  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title: Joseph M. Fabrizio,  Address 7227 Garden Gr  New Port Riche;  Name and Title: Jane E. Fabrizio	Name and Title Processing Sucretary Name and Title Office Name and Title	e:			
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The number of shares of stock is: 1000  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title: Joseph M. Fabrizio,  Address 7227 Garden Gr  New Port Riche;  Name and Title: Jane E. Fabrizio	Name and Title  OFF Name and Title  Address:  Address:  Name and Title	e:			

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box <b>NO</b>	
Name: Joseph M. Fab	rizio
Address: 7227 Ganden	Grove In, SECREDAY, F/- 34652 PM 4: 24
New vor	11Chty F/- 34652 SS- 2
	M. D. C.
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	TATE OFFIDE
Name: Joseph M. Fo	abri210
Address: 7227 Garder	g Grove Ln.
New Port R	ichey, Fl. 34652
Having been named as registered agent to accept ser his certificate, I am familiar with and accept the app	rvice of process for the above stated corporation at the place designated in pointment as registered agent and agree to act in this capacity
Xand mtak	12/17/2014
Required Signature/Registe	ered Agent Date
submit this document and affirm that the facts sta	nted herein are true. I am aware that the false information submitted in a
locument to the Depgriment of State constitutes a thi	ird degree felony as provided for in s.817.155, F.S.
Land M. Fast	12/17/201X
Required Signature/Incom	rporator Date