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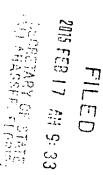
(Re	questor's Name)			
(Address)				
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(Document Number)				
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Don Slan

COVER LETTER

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

SUBJECT:	Key To M. (PROPOSED CORPORA	USIC INC	2			
	(PKOPOSED CORPORA	TE NAME – <u>MUST INCLI</u>	UDE SUFFIX)			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:						
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	Filing Fee,			
	ADDITIONAL COPY REQUIRED					
FROM: Kelly DESOUZA Name (Printed or typed) 9435 & OCEAN DR Suite 8A						
TENSEN BEACH 1-L 34957 City, State & Zip						
407- 970- 0584 Daytime Telephone number						
	VEWIAIENT / E-mail address: (to be used	123 e Yaho For Tuture annual report r	OO. COPT			

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 Note that the corporate of the	AME oration shall be:	Key 7	o Mus	ic II	vC_
	RINCIPAL OFFICE Principal street address	,		Mailing address, if	
9435	SOCEAN	DAIUE		· · · · · · · · · · · · · · · · · · ·	
TB	Florina	(34957			
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	itle: Kc/14 DG			PRESID	ENT
Address	9435 S OCE			<u> </u>	
	Suite 8A	<u> </u>			
	JENSEN BE	ach, FL	<u>.</u> .		
		34957			
Name and Ti	tle:				
Address			_ Address: _		
					
Name and Ti	tle:		Name and Title:		
Address					
Murcss	•				
					
		<u> </u>			

Name and Title:	Name and Title:				
Address	Address:				
					
ARTICLE VI REGISTERED AGENT					
The name and Florida street address (P.O. Box NOT acceptable) of	of the registered agent is:				
Name: Kelly DESOUTA	_				
Address: 9435 S. OLEAN DR A	APT 8A				
JENSEN BEACH, FL	_				
34	957				
ARTICLE VII INCORPORATOR					
The <u>name and address</u> of the Incorporator is:					
Name: Kelly DESOUZA	_				
Address: 9435 S OLEAN DI	RAPT 8A				
JENSEN BEACH, F	L 34957				
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					
	·) · .				
Required Signature/Registered Agent	$\frac{2/11/20/5}{Date}$				
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 degree felony as provided for in s.817.155, F.S.					
Kelly Description Required Signature/Incorporator	2/11/2015				