P15000034448

(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:				

Office Use Only



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DEPARTMENT OF STATE

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CORPORATI

When you need ACCESS to the world

· ACCESS,	
INC.	236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666
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PECIAL INSTRUCTION	NS :

COVER LETTER

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

SUBJECT:	amestic Ser	vice a Raz TENAME- <u>MUSTINCL</u>	air Ie
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED
FROM:	Kennett Wind	(Printed or typed) Address	
	Harana Fl	32333 State & Zip	
\	Daytime T Cong D Nove E-mal address: (to be used)	d for future annual report	notification)
I	Kenny a have NOTE: Please provide the or	anahotrals, co	<i></i> ₩~

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE II F	PRINCIPAL OFFICE	
	Principal street address	Mailing address, if different is:
13 F	Vighland Rd	
grana	¥\ 32333	
in dito		· · · · · · · · · · · · · · · · · · ·
TICLE III P	URPOSE ch the corporation is organized is:	and bedieved 110
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	SHARES s of stock is: \QQ	
number of shares	NITIAL OFFICERS AND/OR DIRECTORS	nd Title:
number of shares TICLE V I Name and 1	NITIAL OFFICERS AND/OR DIRECTORS Title: Years Name a	nd Title:
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number of shares TICLE V I Name and 1 Address	MITIAL OFFICERS AND/OR DIRECTORS Title: Yearneth White Rres Name a Address Harana FI, 32333 Title: Betty White See. Name a	nd Title:
number of shares TICLE V I Name and T Address Name and T	MITIAL OFFICERS AND/OR DIRECTORS Fitle: Leanett White Ross Name a Marchand Rol Address Harana FI, 32333 Title: Betty White See. Name a Address Address Address	nd Title: R R R R R R R R R R R R R R R R R R
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number of shares TICLE V I Name and T Address Name and T Address	MITIAL OFFICERS AND/OR DIRECTORS Title: Henneth White Bres Name a Address Harana FI, 32333 Title: Betty White Sec. Name a Address Highland Rd Address Harana FI, 32333	nd Title: R O O O O O O O O O O O O O O O O O O
Name and T Name and T Address	MITIAL OFFICERS AND/OR DIRECTORS Fitle: Leanett White Ross Name a Marchand Rol Address Harana FI, 32333 Title: Betty White See. Name a Address Address Address	nd Title: R R R R R R R R R R R R R R R R R R

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of Name Address: 399 Mighlow Rd Howara F 32333	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Leneth White Address: 389 Highland Rd Harana Pl 32333	
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as registered Signature/Registered Agent I submit this document and affirm that the facts stated herein are adocument to the Department of State constitutes a third degree felong Required Signature/Incorporator	true. I am aware that the false information Qubratived in a y as provided for in s.817.155, F.S.

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