## P15000087999

(Requestor's Name)				
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<u></u>	WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
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t. Burch (007 2.7.2015)

## **COVER LETTER**

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

SUBJECT:	писклет	Enterprises, P.A.		
		(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are a	n orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee		□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
			ADDITIONAL CO	PPY REQUIRED
FROM		nie Muckler Nam	e (Printed or typed)	
	200	7 20th Ct.		
			Address	
	Jupi	ter, FL 33477		
		City	State & Zip	
	561	-310-7627		
		•	Telephone number	
	jami	emuckler@gmail.com	10.0	
		E-mail address: (to be use	d for future annual report r	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)

The name of the corpora	Muckler Enterprises, P.A.	<b>1.</b>	
ARTICLE II PRINC 2007 20th Ct.	CIPAL OFFICE Principal street address	Mailing	address, if different is:
Jupiter, FL 33477			
		<del></del>	
ADTICLE III DUDDA	DSE Real I Real I	Estate	
			<u> </u>
			20
ARTICLE IV SHAR	ES 100,000 stock is:		STATE CORIED
	stock is: L. OFFICERS AND/OR DIRECTOR		•
		Name and Title:	
Address 20	2007 20th Ct.		
	Jupiter, FL 33477	<del></del>	
Name and Title:		Name and Title:	
Address		Address:	
Name - IT'd			
Name and Title:			

Name a	nd Title:	Name and Title:
Addres	is	Address:
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT ac	ocentable) of the registered agent is:
Name:	Jamie Muckler	
Address:	2007 20th Ct.	
	Jupiter, FL 33477	「
		OCT 20 SBE (AA)
ARTICLE VII	<u>INCORPORATOR</u>	**************************************
The name and a	address of the Incorporator is:	
Name:	Jame Muckler	STATE 10
Address:	2007 20th Ct.	PA OF
	Jupiter, FL 33477	
/ <b></b>		
Effective date, i	EFFECTIVE DATE:  f other than the date of filing:	. (OPTIONAL)
(If an effective	date is listed, the date must be specific	and cannot be more than five business days prior or 90 business
days after the f	iling.)	
		applicable statutory filing requirements, this date will not be listed as
the document's	effective date on the Department of State	s's records.
Having been na	med as registered agent to accept servic	e of process for the above stated corporation at the place designated in
this certifidate, I	am familiar with and accept the appoin	tment as registered agent and agree to act in this capacity
	DUNIO TVIILA UNI.	10-16-15
	Required Signature/Registered	<u> </u>
I submit this do	cument and affirm that the facts stored	herein are true. I am aware that the false information submitted in a
accument to the	Department of State constitutes a third of	degree felony as provided for in s.817.155, F.S.
\U	MULINIUM DE LA PORTE DE LA POR	10-16-15
Requ	uired Signature/Incorporator	Date

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