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Department of State

New Filing Section

Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

Bob Watts

SUBJECT:

Becomme Who We Are

(PROPOSED SORPORATE NAME - MUST INC.)

Enclosed are an original and one (1) copy of the articles of incorporation at

\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee. Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM:	126 3157, St. Petersb	0	<u>3371</u> 3
	727 647	3300	
•	Davtime	l'elephone number	-

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)

Bob Watts

ARTICLE 1 NAME The name of the corporation	shall be: Becom	ne Who W	e Are, Inc.
	LOFFICE scipal street address Shurs FL 3		ig address, if different is:
ARTICLE III PURPOSE The purpose for which the co	orporation is organized is:	Consultir	g & Coachi
ARTICLE IV SHARES The number of shares of stoc ARTICLE V INITIAL O Name and Title:	kin 1000 FFICERS AND/OR DIRECTO Robert S. Wa	RS President	÷
Address 4	124 3157 Au f. Peters burg 3391	Address:	
		Address:	2913 JAN -4
Address		Address:	**
		·	

Name and Title:	Name and Title:
Address	Address:
·	
IRTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Be	ox NOT acceptable) of the registered agent is:
Name: Robert 6.	Watts_
Address: 4124 315	5 burg FL 33713
st. Peter	15 burg FL 33713
<u>ARTICLE VII — INCORPORATOR</u>	J .
The <u>name and address</u> of the Incorporator is:	
Name: Robert	S. Watls
Address: 4124	31 ST Are Ali
<u> </u>	S. Watls 31 ST Au Il. Petersburg Fr 337/3
	$\frac{1/2/2019}{\text{Despecific and cannot be more than five days prior or 90 days after the}}$
filing.)	
<u>Note:</u> If the date inserted in this block does no the document's effective date on the Departme	of meet the applicable statutory filing requirements, this date will not be listed as not of State's records.
Having byen namel as registered agent to bec	ept sorvice of process for the above stated corporation at the place designated in
myregnywate, rum jammur with and accept the	he uppointment as registered agent and agree to act in this capacity 1/2/19
Required Signature/	Registered Agent Date
submit this document and affirm that the splotocument to the Department of State constitute	icts stated herein are true. I am aware that the false information submitted in a is a fixed degree felony as provided for in s.817.155, F.S.
Kut SUL	1/2/19
Required Signature/Incorporator	