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TRANSMITTAL LETTER

REGRETARY DISTRIBUS
DIVISION OF 27 PM 6: 26

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

SUBJECT:^	TE MOLDOVAN JEROPOSED CORPOR	THE NAME - MUST INCL	บบสรบายเม
Enclosed are an orig	rinal and one (1) copy of the art	ticles of incorporation an	d a check for:
S70.00 Filing Fee		S78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM:	MARIA MO	∠∆o∨A∨ (Printed or typed)	
-	2260 NW 77	th TERR.	
	PEMBROKE PIN	VES, 72 3302	×
-	95'y . Daytime	-966 - 1460 Telephone number	**************************************

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

OF

M & J MOLDOVAN, INC.

The undersigned subscriber to these Articles of Incorporation is a natural person competent to contract and hereby form a Corporation for profit under Chapter 607 and/or 621 of the Florida Statutes.

ARTICLE 1 - NAME

The name of the Corporation is M & J MOLDOVAN, INC. (hereinafter, "Corporation").

ARTICLE 2 – PURPOSE OF CORPORATION

The corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE 3 – PRINCIPAL OFFICE

The address of the principal office of this Corporation is 2260 NW 77th Terr., Pembroke Pines, FL 33024 and the mailing address is 2260 NW 77th Terr., Pembroke Pines, FL 33024.

ARTICLE 4 - SHARES

The number of shares of stock is: 1,000 (One Thousand).

ARTICLE 5 - INCORPORATOR

The name and address of the Incorporator is:

MARIA MOLDOVAN 2260 NW 77th Terr. Pembroke Pines, FL 33024

ARTICLE 6 – REGISTERED AGENT

The name and Florida street address of the registered agent is:

MARIA MOLDOVAN 2260 NW 77th Terr. Pembroke Pines, FL 33024

ARTICLE 7 – OFFICERS

The officers of the Corporation shall be:

President:

Maria Moldovan

Vice-President:

Ioan Moldovan

Whose addressed shall be the same as the principal office of the Corporation.

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.

Signature/Registered Agent

lota

Date

Signature/Incorporator

Date

SEGRETARY OF STATE DIVISION OF CHEPORATIONS