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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

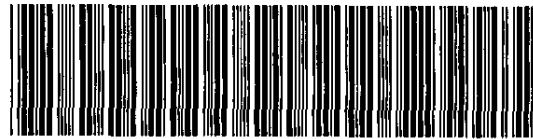
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
13 NOV - 1 PM 12: 04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRB  
11/4/13

**COVER LETTER**

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

**SUBJECT: MSI Analytical Inc.**

**(PROPOSED CORPORATE NAME - MUST INCLUDE 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  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

**ADDITIONAL COPY REQUIRED**

**FROM: MSI Analytical, Inc.**

Name (Printed or typed)

**4360 NE 5th Terrace**

Address

**Oakland Park, Florida 33334**

City, State & Zip

**954-651-7277**

Daytime Telephone number

**fbonus@aol.com**

E-mail address: (to be used for future annual report 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)

**ARTICLE I NAME**

The name of the corporation shall be: MSI Analytical Inc.

**FILED**

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

Mailing address, if different is:

4360 NE 5th Terrace  
Oakland Park, Florida 33334

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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Provide analytical testing and field delivery service to evaluate asbestos, lead, mold, indoor air quality, water, soil and chemical in products. And, conduct any lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Frank N. Bonuso  
Address: 4360 NE 5th Terrace  
Oakland Park, Florida  
33334

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

Name and Title: _____	Name and Title: <u>FILED</u>
Address _____	Address: <u>13 NOV -1 PM 12: 04</u>
_____	<u>SECRETARY OF STATE</u>
_____	<u>TALLAHASSEE, FLORIDA</u>

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Frank N Bonuso

Address: 4360 NE 5th Terrace  
Oakland Park, Florida 33334

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Frank N Bonuso

Address: 4360 NE 5th Terrace  
Oakland Park, Florida 33334

*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*

Frank N Bonuso  
 Required Signature/Registered Agent

10-30-2013  
 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.*

Frank N Bonuso  
 Required Signature/Incorporator

10-30-2013  
 Date