

PA7000008662

TRANSMITTAL LETTER

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

300002055793--7
-01/13/97--01062--017
****122.50 ****122.50

SUBJECT: CMOS, INC.

Enclosed please find an original and one(1) copy of the Articles of Incorporation for the above corporation and check in the amount of \$ 122.50.

FROM: James G. Hutchens, Jr., CPA
P.O. Box 889
Ponte Vedra Beach, Florida 32004-0889
(904) 280-1228

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JAN 29 PM 12: 29

Note: Additional copy of articles is needed only when certified copy is requested.

L610-609-
W97-1454

as of 1/29/97



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JAN 29 PM 12:30

January 21, 1997

JAMES G. HUTCHENS, JR., CPA
POST OFFICE BOX 889
PONTE VEDRA BEACH, FL 32004-0889

SUBJECT: CMOS, INC.
Ref. Number: W97000001454

We have received your document for CMOS, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6973.

Claretha Golden
Document Specialist

Letter Number: 697A00002868

↓
done
1-28-97

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JAN 29 PM 12:30

ARTICLES OF INCORPORATION
OF
CMOS, INC.

The undersigned incorporator, for the purpose of forming a corporation pursuant to the provisions of Chapter 607, Florida Statutes, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:
CMOS, Inc.

The principal place of business of this corporation shall be:
3594 Riverhall Dr.
Jacksonville, Florida 32217

ARTICLE II NATURE OF BUSINESS

The specific nature of business shall be:
Inventory Liquidations

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

1,000 shares at \$.50 par value

ARTICLE IV TERM OF EXISTANCE

The corporation is to exist perpetually.

ARTICLE V OFFICERS/DIRECTORS

The name and street address of the initial officer and director, if any, who shall hold office the first year of the corporation's existence or until their successor is elected, is:

Charles Moskovitz
3594 Riverhall Dr.
Jacksonville, Florida 32217

ARTICLE VI INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Charles Moskovitz
3594 Riverhall Dr.
Jacksonville, Florida 32217

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 6th day of January, 1997.

Signature of Incorporator

Charles D. Moskovitz
President

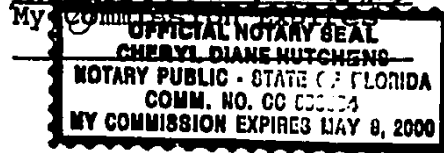
STATE OF FLORIDA

COUNTY OF DUVAL

THE FOREGOING instrument was acknowledged and sworn to before me this 6th day of January, 1997, by Charles Moskovitz of CMOS, Inc.

Notary Public

Cheryl Diane Hutchens



(SEAL)

ARTICLES OF INCORPORATION FILING FEE: \$ 35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JAN 29 PM 12:30

CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is CMOS, Inc.
2. The name and address of the registered agent and office is
James G. Hutchens, Jr.
106 Canal Blvd., Suite B
Ponte Vedra Beach, Florida 32082

Signature Charles S. M... ..
Title President
Date 1/6/97

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

Signature [Signature]
Date 1/6/97

REGISTERED AGENT FILING FEE: \$ 35.00