Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110001450113)))



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To:	
	Division of Corporations
	Fax Number : (850)617-6381
From:	
	Account Name : C T CORPORATION SYSTEM
	Account Number : PCA000000023
	Phone : (850)222-1092
	Fax Number : (850) 878-5368
annual re	mail address for this business entity to be used for fut eport mailings. Enter only one email address please.**

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T. Burch (6/2/2011

COVER LETTER

TO:	New Filing Section Division of Corporations				
eupn	N/ N/Y TN/				
SUBJI	Name of corporation - must include suffix	,			
Dear Si	or Madam:				
"Certifi	osed "Application by Foreign Corporation for Authorization to Transact Business in Florida," atte of Existence," or "Certificate of Good Standing" and check are submitted to register the ferenced foreign corporation to transact business in Florida.				
Please	eturn all correspondence concerning this matter to the following:				
	MOLLY LENORE				
Annual Constitution of Million	Name of Person				
	MOEY INC.				
. ,	Firm/Company				
23	2 3rd Street # E301				
<u> 6</u>	City/State and Zip code				
00	City/State and Zip code				
{ V	OLLY @ MOEYING. Com E-mail address: (to be used for future annual report notification)				
	•				
For fur	ner information concerning this matter, please call:				
<u>N</u>	Name of Person Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building P.O. Box 6327 Clifton Evecutive Center Circle Tallahassee, FL 32314				
Enclos	d is a check for the following amount:				
□s.	2.00 Filing Fee & \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status Certified Copy	čz			

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
NOEY, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
(If name unavailable in Florida, enter afternate corporate name adopted for the purpose of transacting business in Florida)
2 NEW YORK 3 43-2011326
(State or country under the law of which it is incorporated) (FE! number, if applicable)
4. Feb 24, 2003 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 232 3rd Street # E301 Brooklyn NY 11215 (Principal office address)
232 3rd Street # E301 Brooklyn NY 11215 (Current mailing address)
(Current maining address)
8. Exhibit Design & Build Technology & Media Production (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: <u>CT Corporation System</u>
Office Address: 1200 South Pine Island 121
Mantatan 33724
(City), Florida 73724 (Zip code)
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties,
and I am familiar with and accept the obligations of my position as registered agent.
Onlo cel
Whet Morel
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Tables and onsidess addresses of officers without anactors.
A. DIRECTORS
Chairman: Molly Lenore
Address: 232 3rd Street # E301 Brooklyn NY 11215
Vice Chairman: Joseph Stein
Address: 232 3rd Street # 8301 Brooklyn NY 11215
Director: Molly LeNORE Address: 232 3rd Street # 8301 Brooklyn NY 11215
Director: Joseph Stein Address: 232 3rd Street # 8301 Brocklyn NY 11215
B. OFFICERS President: MOLLY LENORE
Address: 232 3rd Street # E301 Brooklyn NY 11215
Address: LOL STA STREET F COST DIRECTION TO THE STREET E
Vice President: Joseph Stein
Address: 232 3rd Street #E301 Brooklyn NY 11215
Socretary: Joseph Stein
Address: 232 3rd Street #E301 Brocklyn NY 11215
Treasurer: Molly LENORE
Address: 237 3rd Street # £301 Brooklyn NY 11215
NOTE: If necessary, you may attached addendlim to the application listing additional officers and/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.
14. MOLLY LENOR E President (Typed or printed name and capacity of person signing application)

State of New York Department of State ss:

I hereby certify, that the Certificate of Incorporation of MOEY, INC. was filed on 02/24/2003, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 01st day of June two thousand and eleven.

Daniel Shapiro

First Deputy Secretary of State

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