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

700003210827--9  
-04/17/00-01093-010  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: MSRE, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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: SUSAN BOON  
Name (Printed or typed)

16117 WHITE OAKS DR.  
Address

LAKE OSWEGO, OR 97035  
City, State & Zip

(503) 635-6780  
Daytime Telephone number

FILED  
00 APR 17 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

4-24  
KC

# 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: MSRE, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 13701 SW KENDALL DR. STE 304  
MIAMI, FL 33186

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for profit

## ARTICLE IV SHARES

The number of shares of stock is: 1,000 shares

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es): President, David Boon  
Secretary/Treasurer, Susan Boon

## ARTICLE VI REGISTERED AGENT


The name and Florida street address of the registered agent is: DAVID BOON  
13701 SW KENDALL DR STE 304  
MIAMI, FL 33186

## ARTICLE VII INCORPORATOR

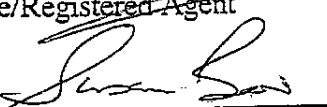
The name and address of the Incorporator is: DAVID BOON  
13701 SW KENDALL DR STE 304  
MIAMI, FL 33186

ARTICLE VIII EFFECTIVE DATE: These Articles of Incorporation for MSRE, Inc. will  
become effective on May 1, 2000.

\*\*\*\*\*  
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

4/12/00  
Date

  
Signature/Incorporator

4/12/00  
Date

FILED  
00 APR 17 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA