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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 922-4001

From: Account Name : CAPITAL CONNECTION, INC.
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FLORIDA PROFIT CORPORATION OR P.A.

MORAN INTIMATES, INC.

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**ARTICLES OF INCORPORATION
OF
MORAN INTIMATES, INC.**

- ARTICLE ONE NAME:** The name of corporation shall be MORAN INTIMATES, INC.
- ARTICLE TWO PRINCIPAL OFFICE:** The street and mailing address of the initial principal office of the corporation shall be 1517 SOUTH MIRAMAR AVE, INDIALANTIC, FL 32903.
- ARTICLE THREE AUTHORIZED SHARES:** The number of shares of stock the corporation is authorized to have outstanding at any one time is: 100 common shares<optional: with the par value of \$1.00 each.
- ARTICLE FOUR INITIAL REGISTERED AGENT/OFFICE:** The name of the initial registered agent and the street address of the initial registered office of the corporation is JOHN MORAN, 1517 SOUTH MIRAMAR AVE, INDIALANTIC, FL 32903.
- ARTICLE FIVE INCORPORATOR:** The name and street address of the incorporator is JOHN MORAN, 1517 SOUTH MIRAMAR AVE, INDIALANTIC, FL 32903.

The undersigned incorporator has executed these Articles of Incorporation

2/23 2001

Signed Incorporator

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=> CAPITAL CONNECTION .TEL=850 222 1222


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**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE**


Pursuant to the provisions of Section 607.0501, 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: **MORAN INTIMATES, INC.**
2. The name and address of the registered agent and office is:
JOHN MORAN, 1517 SOUTH MIRAMAR AVE, INDIALANTIC, FL 32903.

X 
Signed, Incorporator
Date: 2/23 2001

**ACCEPTANCE OF DESIGNATION
AS REGISTERED AGENT**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISION OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

X 
Date: 2/23 2001

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