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### Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

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From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

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### FLORIDA PROFIT CORPORATION OR P.A.

MEASUREMENT & VERIFICATION INC.

Certificate of Status	. 0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 27, 2001

FAS-T

SUBJECT: MEASUREMENT & VERIFICATION INC.

REF: W01000017403

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Neysa Culligan Document Specialist New Filing Section

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#### ARTICLES OF INCORPORATION

OF:

#### MEASUREMENT & VERIFICATION INC.

I, the undersigned, being of legal age and natural person do hereby subscribe to, acknowledge and file the following Articles of Incorporation for the purpose of creating a corporation under the laws of the state of Florida.

## ARTICLE I

The name of this corporation is MEASUREMENT & VERIFICATION INC.

### ARTICLE II PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business.

### ARTICLE III STOCK

This corporation shall be authorized to issue 1,000 shares of capital stock, at a par value of \$1.00 per share. All of said stock shall be payable in cash; property, real or personal; or labor or services in lieu of cash, at a just valuation, to be fixed by the Board of Directors of this corporation. The payment thereof does not have to be at the time of issuance, provided that said shares are subject to calls thereon until the whole consideration therefore shall have been paid.

### ARTICLE IV CORPORATE EXISTENCE

This corporation shall have perpetual existence, unless sooner dissolved according to law.

# ARTICLE V CORPORATE ADDRESS

The street address of the initial principal office of this corporation is: 8755 SW 57<sup>TR</sup> PLACE. COOPER CITY FL, 33328 with the privilege of having its offices and branch offices at other places within or without the State of Florida.

### INCORPORATOR

The name and mailing address of the incorporator is as follows:

NAME

**ADDRESS** 

Joseph Shomar 17439 NW 66 Court Miami Fl, 33015

#### ARTICLE

#### INITIAL BOARD OF DIRECTORS

This corporation shall have three directors initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never be less than one. The names and addresses of the initial directors of this corporation are: President: Lawrence B. Stoff 8755 SW 57th Place Cooper City F1, 33328

Vice Pres: Milagros M. Stoff 8755 SW 57th Place Cooper City FI, 33328 Secretary: Milagros M. Stoff 8755 SW 57th Place Cooper City FL 33328

Treasurer: Lawrence B. Stoff 8755 SW 57th Place Cooper City F1, 33328

#### ARTICLE VIII REGISTERED AGENT

The initial registered agent of this corporation shall be Joseph Shomar and the street address of the initial registered office of this corporation is 8755 SW 57th Place Cooper City FI, 33328.

#### ARTICLE IX ACCOUNTING YEAR

This corporation shall have a calendar year starting January 1st and ending December 31.

## ARTICLE X

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

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:

MEASUREMENT & VERIFICATION INC.

2. The name and address of the registered agent and office is:

JOSEPH SHOMAR 8755 SW 57th Place
(P.O. BOX, NOT ACCEPTABLE)

COOPER CITY, FL 33328.
{CITY/STATE/ZIP}

L30 PH 1:21

SIGNATURE

TITLE-

DATE JULY 271H. 2001

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

DATE

JULY 272H 2001