

CT CORPORATION SYSTEM

P01000115157

CORPORATION(S) NAME

Capricorn Moon Enterprises, Inc.

RECEIVED  
01 DEC - 5 PM 1:35  
TALLAHASSEE, FLORIDA

368004706723--2  
-12/05/01--01079--003  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

<input checked="" type="checkbox"/> Profit - <i>Acts</i>	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

12/5/01

Order#: 4963644

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

FILED  
01 DEC - 5 PM 1:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

J. BRYAN DEC - 5 2001

**ARTICLES OF INCORPORATION**  
**OF**  
**CAPRICORN MOON ENTERPRISES, INC.**

**FILED**  
01 DEC -5 PM 1:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, a natural person competent to contract, does hereby make, subscribe and file these Articles of Incorporation for the purpose of organizing a corporation under the laws of the State of Florida.

ARTICLE I  
CORPORATE NAME

The name of this Corporation shall be: CAPRICORN MOON ENTERPRISES, INC.

ARTICLE II  
PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of the Corporation is 815 N.E. 28<sup>th</sup> Street, #207, Wilton Manors, FL 33334.

ARTICLE III  
NATURE OF CORPORATE BUSINESS AND POWERS

The general nature of the business to be transacted by this Corporation shall be to engage in any and all lawful business permitted under the laws of the United States and the State of Florida.

ARTICLE IV  
CAPITAL STOCK

The maximum number of shares that this Corporation shall be authorized to issue and have outstanding at any one time shall be 1,000 shares of common stock, par value \$.01 per share.

ARTICLE V  
TERM OF EXISTENCE

This Corporation shall have perpetual existence.

ARTICLE VI  
REGISTERED AGENT AND  
INITIAL REGISTERED OFFICE IN FLORIDA

The Registered Agent and the street address of the initial Registered Office of this Corporation in the State of Florida shall be: Janine E. Cox, 815 N.E. 28<sup>th</sup> Street, #207, Wilton Manors, FL 33334.

ARTICLE VII  
BOARD OF DIRECTORS

This Corporation shall have one (1) Director initially.

ARTICLE VIII  
INITIAL DIRECTOR

The name and address of the initial Director of this Corporation are:

Janine E. Cox  
815 N.E. 28<sup>th</sup> Street, #207  
Wilton Manors, FL 33334

The person named as initial Director shall hold office for the first year of existence of this Corporation, or until their successors are elected or appointed and have qualified, whichever occurs first.

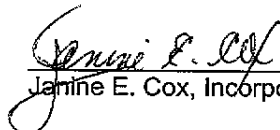
ARTICLE IX  
INCORPORATOR

The name and address of the person signing these Articles of Incorporation as the Incorporator is Janine E. Cox.

ARTICLE X  
INDEMNIFICATION

This Corporation may indemnify any director, officer, employee or agent of the Corporation to the fullest extent permitted by Florida law.

IN WITNESS WHEREOF, the undersigned Incorporator has executed the foregoing Articles of Incorporation on the 5th day of December, 2001

  
\_\_\_\_\_  
Janine E. Cox, Incorporator

CERTIFICATE DESIGNATING REGISTERED AGENT  
AND OFFICE FOR SERVICE OF PROCESS

CAPRICORN MOON ENTERPRISES, INC., a corporation existing under the laws of the State of Florida with its principal office and mailing address at 815 N.E. 28<sup>th</sup> Street, #207, Wilton Manors, FL 33334, has named Janine E. Cox whose address is 815 N.E. 28<sup>th</sup> Street, #207, Wilton Manors, FL 33334, as its agent to accept service of process within the State of Florida.

ACCEPTANCE:

Having been named to accept service of process for the above named Corporation, at the place designated in this Certificate, I hereby accept the appointment as Registered Agent, and agree to comply with all applicable provisions of law. In addition, I hereby am familiar with and accept the duties and responsibilities as Registered Agent for said Corporation.

By: Janine E. Cox 12/5/01  
Janine E. Cox

FILED  
01 DEC -5 PM 1:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA