## POACOOTH836

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

SUBJECT: OFFICIAL MOVING CO.  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
			00006250 -07/08/02( *****87.50	)1061008
Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a	check for:	1
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	& Certificate of Status	
ADDITIONAL COPY REQUIRED				
FROM	: Roy A. EBA Name (Pr	rinted or typed)		- 
	817 Nu	Address	SEC	2002
	Miami, F.	C. 33127 State & Zíp	——<	
	(786)859-1955 Daytime T	(305) 758 - 8 elephone number	EFLORIDA	¥12:06

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

57/10/02

## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAMEThe name of the corporation shall be: Official Movines Company ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 817 NW 435. Miami, FL. 33127 ARTICLE III The purpose for which the corporation is organized is: Movines Company ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS (DIRECTORS (optional) The name(s), address(es) and title(s): Koy A. EBanks Sr. - 1060 NW 4652 Mian, Fl. 33127 - Pres. Derrich P. Esants - 817 NW 4352 Mia, Fl. 33127 - Vice Pres. Harold A. Holmes - 13/37 NWD Min, Pl. 33165 REGISTERED AGENT The name and Florida street address of the registered agent is: Koy A. EBANKS Sn. 1060 NW 465. MIAMI, FC, 33127 <u>ARTICLE VII</u> INCORPORATOR The name and address of the Incorporator is: Roy A. Esantes In. 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

Signature/Incorporator