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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 MAY 22 PM 2:58

TRANSMITTAL LETTER

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

SUBJECT: CHUCK MOSELY ALL COAST AIRCRAFT RECOVERY, 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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: P. A. Peters, Peters Accounting, Inc.
Name (Printed or typed)

P.O. BOX 492060

Address

Leesburg, FL 34749-2060

City, State & Zip

(352) 365-7832

Daytime Telephone number

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

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ARTICLES OF INCORPORATION
OF
CHUCK MOSELY ALL COAST AIRCRAFT RECOVERY, INC.

The undersigned incorporators hereby associate themselves together to form a corporation under Chapter 607, Florida Statutes.

ARTICLE I

NAME

The name of the corporation is: CHUCK MOSELY ALL COAST AIRCRAFT
RECOVERY, INC.

whose address is: 41524 Kitty Hawk Drive, Weirsdale, FL 32195

ARTICLE II

GENERAL PURPOSE

The general purpose or purposes for which the corporation is organized is the transaction of any or all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

ARTICLE III

CAPITAL STOCK

The aggregate number of shares of stock which the corporation shall have the authority to issue is 60,000 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV
TERM OF EXISTENCE

This corporation shall begin its existence on June 1, 2003 &/or the day these Articles of Incorporation are filed with the Secretary of State of the State of Florida, and shall exist perpetually.

ARTICLE V
ADDRESS OF INITIAL REGISTERED OFFICE AND
NAME OF INITIAL REGISTERED AGENT

The initial registered office of this corporation and the name of its initial registered agent at such address are:

Mary Ann Mosely
41524 Kitty Hawk Dr.
Weirsdale, FL 32195

ARTICLE VI

DIRECTORS

The initial Board of Directors shall consist of two (2) members. A member of the Board of Directors need not be a resident of the State of Florida or a shareholder of the corporation.

The name and address of the person's who shall serve as Directors until the first annual meeting of shareholders, or until their successors have been elected and qualified are as follows:

<u>NAME</u>	<u>ADDRESS</u>
Charles L. Mosely	41524 Kitty Hawk Drive, Weirsdale, FL 32195
Mary Ann Mosely	41524 Kitty Hawk Drive, Weirsdale, FL 32195

ARTICLE VII

OFFICERS

The names and addresses of the officers of the corporation are:

PRESIDENT:	CHARLES L. MOSELY
	41524 Kitty Hawk Drive
	Weirsdale, FL 32195

SECRETARY/TREASURER:	MARY ANN MOSELY
	41524 Kitty Hawk Drive
	Weirsdale, FL 32195

ARTICLE VIII

INCORPORATORS

The name and address of each incorporator and the number of shares of stock which each shall take are:

<u>NAME</u>	<u>ADDRESS</u>	<u>SHARES</u>
Charles L. Mosely	41524 Kitty Hawk Dr. Weirsdale, FL 32195	50
Mary Ann Mosely	41524 Kitty Hawk Dr. Weirsdale, FL 32195	50

ARTICLE IX
AMENDMENT

The Articles of Incorporation may be amended in the manner provided by law.

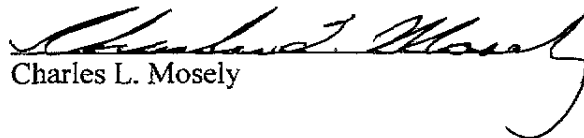
ARTICLE X
BYLAWS

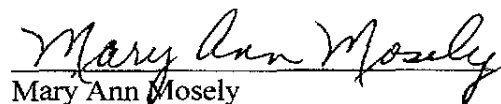
The power to adopt, amend or repeal the Bylaws shall be reserved to the
Shareholders of this corporation.

ARTICLE XI
INDEMNIFICATION

The corporation shall indemnify each officer and director, including former
officers and directors, to the full extent permitted by law.

IN WITNESS WHEREOF, We have hereunto set our hands and seals
this 19 day of May, 2003.


Charles L. Mosely


Mary Ann Mosely

STATE OF FLORIDA
COUNTY OF LAKE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared CHARLES L. MOSELY and MARY ANN MOSELY personally known to me, and who executed the foregoing document, and who acknowledged before me that they executed the same for the uses and purposes set forth therein, and who did (did not) take an oath.

WITNESS my hand and official seal in the State and County last aforesaid this ____ day of
May, 2003.


NOTARY PUBLIC NAME: Patricia A. Peters

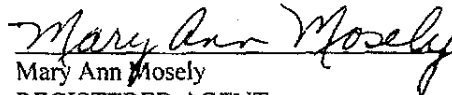
My commission expires:



Patricia A Peters
My Commission DD049051
Expires September 27 2005

ACKNOWLEDGMENT OF REGISTERED AGENT

Having been named to accept service of process for the above corporation at the place designated in these Articles of Incorporation, 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.


Mary Ann Mosely
REGISTERED AGENT

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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