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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

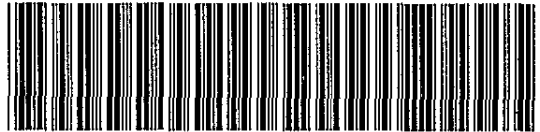
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

A.H
12-4-0-

TRANSMITTAL LETTER

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

SUBJECT: ALFRED MOORE 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 of Status

| | |
|--|--|
| <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| ADDITIONAL COPY REQUIRED | |

FROM:

ALFRED MMORE
Name (Printed or typed)

7709 PASCHAL STREET
Address

JACKSONVILLE, FL. 32220
City, State & Zip

(904) 571-2873
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ALFRED MOORE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

7709 PASCHAL STREET
JACKSONVILLE, FL. 32220

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRANSACTING ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES OF ONE DOLLAR (1.00) PAR VALUE COMMON STOCK

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

| | |
|-------------------------|-------------------------|
| PRESIDENT | SECRETARY |
| ALFRED MOORE | ALFRED MOORE |
| 7709 PASCHAL STREET | 7709 PASCHAL STREET |
| JACKSONVILLE, FL. 32220 | JACKSONVILLE, FL. 32220 |

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ALFRED MOORE
7709 PASCHAL STREET
JACKSONVILLE, FL., 32220

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALFRED MOORE
7709 PASCHAL STREET
JACKSONVILLE, FL. 32220

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

* Alfred W. Moore
Signature/Registered Agent

11-20-03
Date

* Alfred W. Moore
Signature/Incorporator

11-20-03
Date

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TALLAHASSEE FLORIDA