

P04000096422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

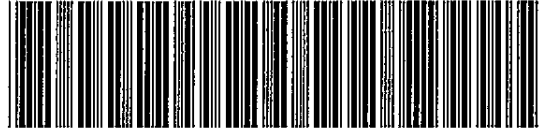
(Business Entity Name)

(Document Number)

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04 JUN 24 PM 12:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
04 JUN 24 AM 11:14  
OFFICE OF THE SECRETARY OF STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. Moinports & Infinite Possibilities, Inc  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

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☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF INCORPORATION**  
**Of**  
**MOIMPORTS & INFINITE POSSIBILITIES, INC.**

**FILED**  
04 JUN 24 PM 12:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I, NAME**

The name of this corporation is MOIMPORTS & INFINITE POSSIBILITIES, INC.

**ARTICLE II, NATURE OF BUSINESS**

MOIMPORTS & INFINITE POSSIBILITIES, INC. is organized for the purpose of transacting any lawful business for which corporations may be formed in Florida.

**ARTICLE III, TERM OF EXISTENCE**

The duration of MOIMPORTS & INFINITE POSSIBILITIES, INC. is perpetual.

**ARTICLE IV, CAPITAL STOCK**

The corporation is authorized to issue 100 shares of common stock, par value \$1.00 per share.

**ARTICLE V, ADDRESS**

The principle address of the corporation is:

14240 SW 142<sup>nd</sup> Avenue  
Miami, Florida 33186

and the name of the initial registered agent of this corporation at this address is:

Mauricio Serna  
13951 SW 66<sup>th</sup> Street, #A908  
Miami, Florida 33183

#### **ARTICLE VI, INITIAL DIRECTORS**

MOIMPORTS & INFINITE POSSIBILITIES, INC. shall have one (1) director, and the number of directors may be changed as provided in the bylaws, but shall never be less than one. The name and address of the initial directors are:

Mauricio Serna  
13951 SW 66th Street, Apt. A908  
Miami, Florida 33183

President /Secretary/ Director

#### **ARTICLE VII, INCORPORATOR**

The name and addresses of the incorporator of this corporation is:

Mauricio Serna  
13951 SW 66th Street, Apt. A908  
Miami, Florida 33183



Mauricio Serna, Incorporator

FILED

ACCEPTANCE OF APPOINTMENT

04 JUN 24 PM 12:55

OF

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REGISTERED AGENT

Pursuant to the provisions of section 607.0501, 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 is: MOIMPORTS & INFINITE POSSIBILITIES, INC.

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

Mauricio Serna

13951 SW 66<sup>th</sup> Street, #A908

Miami, Florida 33183

SIGNATURE 

TITLE President/Director

DATE June 22, 2004

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THE CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISION OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE 

DATE June 22, 2004