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# Florida Department of State

Division of Corporations Public Access System

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# FLORIDA PROFIT CORPORATION OR P.A.

Morel Screening, Inc.

Certificate of Status	1
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#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Morel Screening, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Morel Screening, Inc. 111 W. Pasco Ln. Cocoa Beach, FL 32931 OLOCT IS AN 9: 03

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

CORPDIRECT AGENTS, INC. 103 North Meridian Street, Lower Level Tallahassee, FL 32301

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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## ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

John Morel - 111 W Pasco Ln., Cocoa Beach, FL 32931 - President

### ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

John Morel - 111 W Pasco Ln., Cocoa Beach, FL 32931 - President

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

13th day of <u>October</u> 2004.

John Morel
SIGNATURE

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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 THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

Morel Screening, Inc.

1. The name of the corporation is:

SIGNATURE

	CORPDIRECT AGENTS, INC.
	Name 103 North Meridian Street, Lower Level
	(P.O. Box or Mail Drop Box NOT Acceptable)
	Tallahassee, FL 32301
	(City / State / Zip)
oration at the place designate I and agree to act in this cape	agent and to accept service of process for the above stated ed in this certificate, I hereby accept the appointment as reg acity. I further agree to comply with the provisions of all th te performance of my duties, and am familiar with and acc
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