

P06000060916

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000117323 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (305)672-0686
Fax Number : (305)672-9110

FLORIDA PROFIT/NON PROFIT CORPORATION

MOON MIST, INC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

FILED
06 APR 28 AM 9:56
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Electronic Filing Menu

Corporate Filing Menu

Help

C.L.5-

FILED
06 APR 28 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
MOON MIST, INC.

ARTICLE I
Name

The name of the corporation is MOON MIST, INC.

ARTICLE II
Duration

This corporation shall have a perpetual existence, unless dissolved according to law, commencing on the 27 day of April, 2006.

ARTICLE III
Purpose

This corporation is organized for the purpose of transacting any or all lawful business for which corporations may be incorporated under the Florida Business Corporation Act.

ARTICLE IV
Capital Stock

This corporation is authorized to issue ONE HUNDRED (100) shares of ONE AND NO/100 DOLLARS (\$1.00) par value common stock, which shall be designated "Common Shares."

ARTICLE V
Principal Office; Initial Registered Office and Agent

The street address of the initial principal office and registered office of this corporation is: Therrel Baisden, P.A., SunTrust International Center, One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131, and the name of the initial registered agent of this corporation at that address is: Jonathan Feuerman, Esq.

ARTICLE VI
Initial Board of Directors

This corporation shall initially have two (2) directors. The number of directors may be increased or decreased from time to time

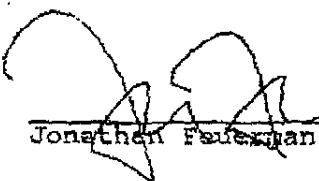
**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM
PROCESS MAY BE SERVED**

MOON MIST, INC.

In pursuance of the Florida Statutes, the following is submitted, in compliance with said Act:

First--that MOON MIST, INC., desiring to organize under the laws of the State of Florida with its principal office at: c/o Therrel Baisden, P.A., SunTrust International Center, One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131, has named Jonathan Feuerman, Esq., located at SunTrust International Center, One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131, as its agent to accept service of process within this state.

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.


Jonathan Feuerman

W:\Choy & Fields\ARTICLES OF INCORPORATION.wpd

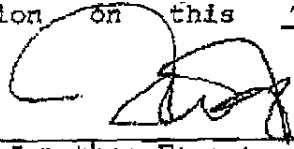
FILED
06 APR 28 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

by the By-laws, but shall never be less than one (1). The name and address of the initial director(s) of this corporation are: Allan C. Fields and Aubrey Choy, c/o Therrel Baisden, P.A., SunTrust International Center, One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131.

ARTICLE VII
Incorporator

The name and address of the person signing these Articles is: Jonathan Feuerman, Esq., Therrel Baisden, P.A., SunTrust International Center, One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation on this 27 day of April, 2006.


Jonathan Feuerman, Incorporator

STATE OF FLORIDA:

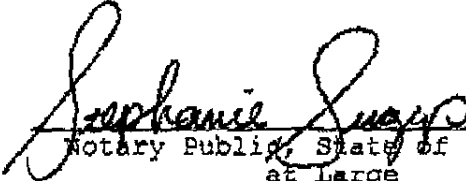
SS:

COUNTY OF MIAMI-DADE:

The foregoing instrument was acknowledged before me this 27 day of April, 2006, by Jonathan Feuerman, ESQ., who is personally known to me or who has produced _____ as identification.



Stephanie Sugar
My Commission DD180849
Expires September 17 2008


Notary Public, State of Florida
at Large

Stephanie Sugar
Type/Print/or Stamp Name of Notary

My Commission Expires: