

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number: 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT/NON PROFIT CORPORATION

CARCAMO BROTHERS MOVING, INC.

ertificate of Status	0
rtified Copy	1.
ge Count	03
timated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION OF CARCAMO BROTHERS MOVING, INC.

ARTICLE I

THE NAME OF THE CORPORATION IS:

CARCAMO BROTHERS MOVING, INC.

ARTICLE II

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE III

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THE CORPORATION IS AUTHORIZED TO ISSUES IS 100 SHARES AT \$10.00 PER VALUE.

ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH CORPORATION WILL BEGIN BUSINESS IS THE SUM OF \$1,000.00.

ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMENCE UPON FILING.

ARTICLE VI

THE STREET ADDRESS IS THE PRINCIPAL OFFICE OF THE CORPORATION, IN THIS STATE SHALL BE:

14160 NW 22 PL. OPA LOCKA, FL. 33054

ARTICLE VII

THE NAME (5) AND STREET ADDRESS(ES) OF THE PERSON SIGNING THESE ARTICLES ARE:

FLORIDALMA MORENO 14160 NW 22 PL, OPA LOCKA, FL, 33054

ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN TWO OR MORE THAN SIX DIRECTORS, THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF FOUR DIRECTORS WHOSE NAMES AND ADDRESSES ARE AS FOLLOWS:

FLORIDALMA MORENO - PRESIDENT 14160 NW 22 PL OPA LOCKA, FL, 33054

ARTICLE IX

The street address of the initial registered office, and the name of the initial registered agent at that address shall be:

> FLORIDALMA MORFINO 14160 NW 22 PL. OPA LOCKA, FL. 33054

THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS TWENTY NINTH DAY OF AUGUST, 2007.

FLORIDALMA MORENO

Incorporator

CERTIFICATE OF DESIGNATION

REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

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

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PLORIDALMA MORENO

14160 NW 22 PL.

OPA LOCKA, FLORIDA 33054

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 THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS 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 -

PLORIDALMA MORENO

DATE: 00/29/02