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CSH SERVICES

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CSH SERVICES, LLC
Account Number : 120070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

FLORIDA PROFIT/NON PROFIT CORPORATION

MOPSTERS INC.

Certificate of Status	0
Certified Copy	0
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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:

MOPSTERS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1417 7TH STREET

ORANGE CITY, FLORIDA 32763

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR, PRESIDENT

PATRICIA M. COLLINS

1417 7TH STREET

ORANGE CITY, FLORIDA 32763

VICE-PRESIDENT, SECRETARY, TREASURER

MARGARET COTTRILL

P.O. Box 132

ASTOR, FLORIDA 32102

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PAGE 2 MOPSTERS INC.

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

PATRICIA M. COLLINS
1417 7TH STREET
ORANGE CITY, FLORIDA 32763

ARTICLE VII INCORPORATOR

The name and Florida street address of the Incorporator is:

PATRICIA M. COLLINS
1417 7TH STREET
ORANGE CITY, FLORIDA 32763

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.


PATRICIA M. COLLINS / Registered Agent

3-15-08
Date


PATRICIA M. COLLINS / Incorporator

3-15-08
Date