P08000084465

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| | | | | |
| (Address) | | | | |
| | | | | |
| (Address) | | | | |
| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| , , | | | | |
| (Document Number) | | | | |
| (Document Number) | | | | |
| | | | | |
| Certified Copies Certificates of Status | | | | |
| | | | | |
| Special Instructions to Filing Officer: | | | | |
| , | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



800135521068

09/15/08--01027--010 **87.50

OB SEP 15 PH 2: 35
SECRETARY OF STATE
TALLAHASSEE, FLORING

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

| SUBJECT: 1 M | NEX INTERNATIONA (PROPOSED CORPOR | L SERVICES | CORP. | |
|---|--|---|--|--|
| | (PROPOSED CORPOR) | ATE NAME – <u>MUST INCL</u> | UDE SUFFIX) | |
| Enclosed are an orig | inal and one (1) copy of the arti | cles of incorporation and | a check for: | |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED | |
| FROM: TROY W. RAKES Name (Printed or typed) | | | | |
| | 5396 PERGRAM | O CT. Address | | |
| JACKSONVILLE FL. 32257 City, State & Zip 904-910-4198 Davtime Telephone number | | | | |

NOTE: Please provide the original and one copy of the articles.

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:

IMEX INTERNAMONAL SERVICES CORP

OB SEP 15 PM 2: 35 SECRETARY OF STATE TALLAHASSEE PLOBINA

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 5396 PERGRAN CT.

JACKSONVILLE FL 37257

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NEW BUSINESS

IMPORT/EXPORT/ DISTRIBUTORS

ARTICLE IV SHARES

The number of shares of stock is: 2,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

TROY W RAKES - 5396 PERGRAN CT, JACKSONVILLE FL 32257 PRESIDENT /TREASURER/SECRETARY/DIRECTOR

ALEXANDRA CAPOZZI- 5396 PERGRANCT JACKSONVILLE FL. 32257 VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

TROY W. RAKES 5396 PERGRAN CT. JACKSONVILLE FL. 32257

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

TROY W RAKES
5396 PERGRANCT.
JACKSONVILLE FL. 32257

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

Signature/Registered Agent 9/10/08

Signature/Incorporator Date