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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

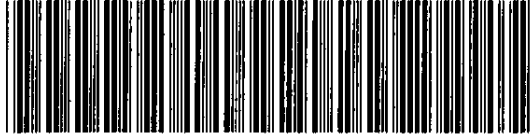
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 OCT -9 PM 4:30
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

EP 10/10/08

COVER LETTER

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

SUBJECT: 5MOONS, INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Michael L. Moon

Name (Printed or typed)

104 Chelsea Lane

Address

Lynn Haven, Florida 32444

City, State & Zip

850-258-8063

Daytime Telephone number

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

ARTICLES OF INCORPORATION

OF

5 MOONS, INC.

ARTICLE I

NAME

The name of the Corporation is 5 Moons, Inc.

ARTICLE II

TERM OF CORPORATE EXISTENCE

The corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III

PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV

CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE DOLLAR (\$1.00) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V

REGISTERED OFFICE AND AGENT

The initial registered office of the Corporation is 104 Chelsea Lane, Lynn Haven, Florida 32444. The initial registered agent at that address is Michael L. Moon.

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TALLAHASSEE, FLORIDA

ARTICLE VI

DIRECTORS

The business of the Corporation shall be managed by a Board of Directors consisting of not fewer than one person, the exact number to be determined from time to time in accordance with the By-Laws.

The name and address of the first Director of the Board of Directors who shall serve until the first annual meeting of the shareholders or until their successors are elected and qualified shall be:

Michael L. Moon 104 Chelsea Lane
Lynn Haven, Florida 32444

ARTICLE VII

INCORPORATOR

The name and address of the incorporator is: Michael L. Moon, 104 Chelsea Lane, Lynn Haven, Florida 32444.

ARTICLE VIII

INDEMNIFICATION

Every person now or hereafter serving as director, officer or employee of the Corporation shall be indemnified and held harmless by the Corporation from and against any and all loss, cost, liability and expense that may be imposed upon or incurred by him in connection with or resulting from any claim, action, suit or proceeding, in which he may become involved, as a party or otherwise, by reason of his being or having been a director, officer or employee of the Corporation, whether or not he continues to be such at the time such loss, cost, liability or expense shall have been imposed or incurred, except with regard to matters as to which any such director, officer or employee shall be adjudged in any claim, action, suit or proceeding to be liable for his own gross negligence or willful misconduct in the performance of duty.

Expenses (including attorneys' fees) incurred in defending any claim action, suit or proceeding may be paid by the Corporation in advance of the final disposition of such a proceeding.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, I have signed these Articles of Incorporation this 26th.
Day of September, 2008.

Michael L. Moon

Michael L. Moon

STATE OF FLORIDA)
)
COUNTY OF BAY)

BEFORE ME, the undersigned authority, personally appeared Michael L. Moon, who is personally known to me to be the person who executed the foregoing Articles of Incorporation and he acknowledged before me according to law, that he made and subscribed the same for the purpose therein mentioned and set forth.

WITNESS my hand and official seal, in the State and County named above this 26th. Day of September, 2008.

Doris McCart

(Notary Seal)



Notary Public, State of Florida

My Commission expires: 7/26/09

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

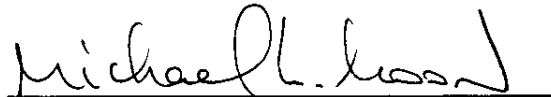
**CERTIFICATE OF REGISTERED AGENT
OF**

5 MOONS, INC.

Pursuant To Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at 104 Chelsea Lane, Lynn Haven, Florida 32444 has named MICHAEL L. MOON, 104 Chelsea Lane, Lynn Haven, FL. 32444, located at the aforesaid address, as its Registered Agent to accept service of process within this State.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.



MICHAEL L. MOON
Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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