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09 JUL 13 PM 1:26

FILED

B. McKnight JUL 14 2009

COVER LETTER

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

SUBJECT: My Moment, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Valerie S. Foster
 Name (Printed or typed)

665 SW SW 7th Street
 Address

Belle Glade, FL 33430
 City, State & Zip

561-452-0005
 Daytime Telephone number

LadyValorie@aol.com
 E-mail address: (to be used for future annual report notification)

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: My Moment, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

665 SW 7th Street
Belle Glade, FL 33430

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Specific purpose for a professional corporation

ARTICLE IV SHARES

The number of shares of stock is:

4,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Valerie S. Foster - Co-Owner
Mildred Benjamin - Co-Owner

ARTICLE VI REGISTERED AGENT

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

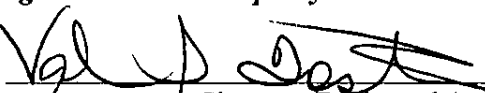
Valerie S. Foster
665 SW 7th Street
Belle Glade, FL 33430

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Valerie S. Foster
665 SW 7th Street
Belle Glade, FL 33430

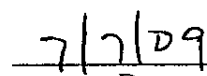
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity




Signature/Registered Agent



Signature/Incorporator



Date



Date

FILED
09 JUL 13 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA