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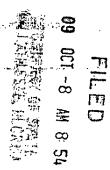
(Requestor's Name)				
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10-12-09

COVER LETTER

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

SUBJECT:	YOOM TAS IN	ン	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status
FROM:	MOONTAS IA	/c·	
	476 HARding		
	SURFSI de City,	F/ 33 154 State & Zip	
	786-3 Daytime T	33-//3/ Telephone number	
	E-mail address: (to be use	BE//Smoth-W	E T

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 The name of the corporation shall be: MOONTAS INC. ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 9476 HARDING AVE SURFSIDE F/ 33154 ARTICLE III PURPOSE The purpose for which the corporation is organized is: RESTAURANT ARTICLE IV SHARES The number of shares of stock is: 1000 Shares et 1. 12 Par Valve ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS SHAMIR E/NOMANY PRESIDENT GOTS FRONDE SURFSIDE F/33N/ REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Shamir Elwomany 9073 FRONCE SURFSIDE F/ 33151 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: SHAMIR EINDMANY 9073 FROUDE SURFSIDE F/ 37/01

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

X Signature/Registered Agent

Signature/Incorporator

X 10/06/09
Date

X 10/06/09
Date