

P11000006371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

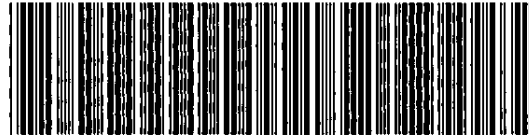
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300189024673

01/18/11--01065--022 **87.50

FILED

2011 JAN 19 AM 11:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 20 2011

COVER LETTER

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

SUBJECT: Moving & Storage Solutions, 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: Jonathon C. Gracey

Name (Printed or typed)

6320 Lucerne St.

Address

Jupiter, Florida 33458

City, State & Zip

561-222-5557

Daytime Telephone number

jcgracey@aol.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 JAN 19 AM 11:57

FILED

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: **Moving & Storage Solutions, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
6320 Lucerne St.
Jupiter, Florida 33458

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Sales for Residential and Commercial Moving

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jonathon C. Gracey, President	Name and Title: _____
Address: 6320 Lucerne St.	Address: _____
Jupiter, Florida 33458	_____
_____	_____

Name and Title: JoAnn Gracey, Vice President	Name and Title: _____
Address: 6320 Lucerne St.	Address: _____
Jupiter, Florida 33458	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: **Jonathon C. Gracey**
Address: **6320 Lucerne St.**
Jupiter, Florida 33458

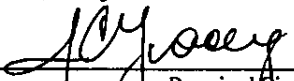
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Jonathon C. Gracey**
Address: **6320 Lucerne St.**
Jupiter, Florida 33458

FILED
2011 JAN 19 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

 _____ Required Signature/Registered Agent	<u>1/14/11</u> Date
---	------------------------

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 _____ Required Signature/Incorporator	<u>1/14/11</u> Date
---	------------------------