

Divisi

JAN. 31. 2011 3:53PM

CAPITAL CONNECTION

NO 3603

P.

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
Fax Number : (850) 222-1222

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address:

Moving Operations@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Moving Operations Inc

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

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RECEIVED
11 JAN 31 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
11 JAN 31 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS 2/1/11

JAN 31 2011 3:53PM

CAPITAL CONNECTION

NO. 3603 P...2

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

11 JAN 31 AM 10:10

ARTICLE I NAME Moving Operations Inc
The name of the corporation shall be:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE
Principal street address
1123 Crown Park Cir
Winter Garden FL 34787

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide dispatching and operational service to multiple household goods companies.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John L. Grasta President
Address: 705 Snowden St
Ocoee, FL 34761

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

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

Name: John Grasta
Address: 705 Snowden St
Ocoee, FL 34761

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: John Grasta
Address: 705 Snowden St
Ocoee, FL 34761

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

John L. Grasta
Required Signature/Registered Agent

1/31/2011

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.

John L. Grasta
Required Signature/Incorporator

1/31/2011

Date