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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1515

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11 JUN 28 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
ONEMOOR FLORIDA INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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TALLAHASSEE, FLORIDA

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: ONEMOOR FLORIDA INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

c/o Loeb, Block & Partners LLP

505 Park Avenue, 8th Floor

New York, NY 10022

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful purpose permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sheldon Beda - Director and President Name and Title: _____

Address: c/o Loeb, Block & Partners LLP Address: _____

505 Park Avenue, 8th Floor

New York, NY 10022

Name and Title: Alberto Beda - Director and Secretary Name and Title: _____

Address: c/o Loeb, Block & Partners LLP Address: _____

505 Park Avenue, 8th Floor

New York, NY 10022

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: Corporation Service Company

Address: 1201 Hays Street

Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Diana M. Saliceti, Esq.

Address: Loeb, Block & Partners LLP

505 Park Avenue, 8th Floor

New York, NY 10022

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

Jeanine Reynolds
as agent

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

Diana M. Saliceti, Esq.

June 28, 2011

Date

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11 JUN 28 PM 3:12
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TALLAHASSEE, FLORIDA