

P12000070692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

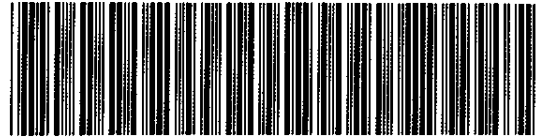
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/15/12--01008--028 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 15 AM 10:48

Ps 8/16/12

COVER LETTER

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

SUBJECT: M O E Worldwide 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Lance Thomas
Name (Printed or typed)

365 NW 8th st apt 307
Address

Miami, Fl 33136
City, State & Zip

7869755309
Daytime Telephone number

thehardone22@gmail.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME M O E Worldwide Inc.

The name of the corporation shall be:

12 AUG 15 AM 10:48

ARTICLE II PRINCIPAL OFFICE

Principal street address
365 NW 8th st apt 307
Miami, FL 33136

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To enterprise and provide services and wholesale merchandise for profit.

ARTICLE IV SHARES

The number of shares of stock is: 10000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lance Thomas-President
Address: 365 NW 8th st apt 307
Miami, FL 33136

Name and Title: Lance Thomas-Vice President
Address: 365 NW 8th st apt 307
Miami, FL 33136

Name and Title: Lance Thomas-Treasurer
Address: 365 NW 8th st apt 307
Miami, FL 33136

Name and Title: Lance Thomas-Secretary
Address: 365 NW 8th st apt 307
Miami, FL 33136

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:

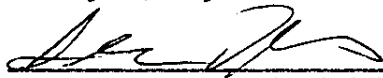
Name: Lance Thomas
Address: 365 NW 8th st apt 307
Miami, FL 33136

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lance Thomas
Address: 365 NW 8th st apt 307
Miami, FL 33136

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

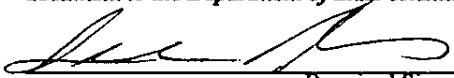


Required Signature/Registered Agent

8-13-2012

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

8-13-2012

Date