

P12000070692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

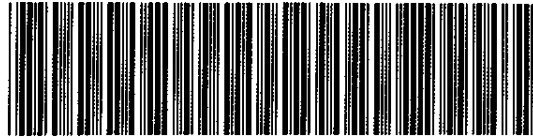
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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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
<b>ADDITIONAL COPY REQUIRED</b>	

**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

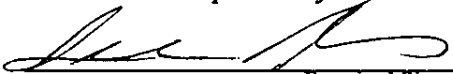


Required Signature/Registered Agent

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