P1300089933				
(Requestor's Name) (Address) (Address)	300253305793			
(City/State/Zip/Phone #)	11/01/1301006001 **70.00			
(Business Entity Name) (Document Number)				
Certified Copies Certificates of Status	FILED 13 NOV -1 PH 12: 04 SECRETARY OF STATE TALLAHASSEE, FLORIDA MPJ4/13			

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COVER LETTER

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

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MSI Analytical Inc. SUBJECT: (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: MSI Analytical, Inc.

Name (Printed or typed)

4360 NE 5th Terrace

Address

Oakland Park, Florida 33334

City, State & Zip

954-651-7277

Daytime Telephone number

fbonuso@aol.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 INCO In compliance with Chapter 607 and)
ARTICLE I NAM	E MSI Analytical Inc		
		•	FILED
	<u>ICIPAL OFFICE</u> Principal <u>street</u> address	Mailing ad	Idress, if differential - 1 PH 12: 04
4360 NE 5th T	errace		SEGRETARY OF STATE
Oakland Park,	Florida 33334		TALLAHASSEE, FRORID'A
ARTICLE III PURI	Provide	analytical testir	ig and field delivery
service to eval	uate asbestos, lead, mol	d, indoor air qual	ity, water, soil and
	oducts. And, conduct any	·····	······
ARTICLE IV SHA The number of shares of s ARTICLE V INIT Name and Title Address	stock is: 100 IAL OFFICERS AND/OR DIRECTOR	Name and Title: Address:	FILED 13 NOV -1 PH 12: 04 SECRETARY OF STATE TALLATASSEE, FLARIDA
	33334		
Name and Title:		_ Name and Title:	
Address		Address:	
Name and Title:		_ Name and Title:	
Address		Address:	
			······

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Name and Title:	Name and Title:	FILED
Address	Address:	13 NOV - 1 PM 12: 04

ARTICLE VI REGISTERED AGENT

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

Name:	Frank N Bonuso
	1360 NE 5th Tor

Address:

4300 NE 5th Terrace Oakland Park, Florida 33334

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Address:

Frank N Bonuso 4360 NE 5th Terrace Oakland Park, Florida 33334

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>10-30-2013</u> Date

(conti.)

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.

Signature/Incorporator

10-30-2013