

P13000089933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

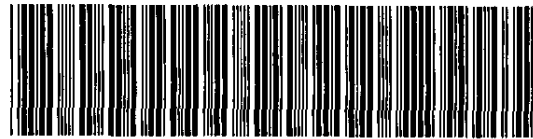
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRB
11/4/13

COVER LETTER

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

SUBJECT: MSI Analytical 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

\$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

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

ARTICLE I NAME
The name of the corporation shall be: MSI Analytical Inc.

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ARTICLE II PRINCIPAL OFFICE
Principal ~~street~~ address

Mailing address, if different is:

4360 NE 5th Terrace
Oakland Park, Florida 33334

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ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Provide analytical testing and field delivery service to evaluate asbestos, lead, mold, indoor air quality, water, soil and chemical in products. And, conduct any lawful business.

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Frank N. Bonuso
Address: 4360 NE 5th Terrace
Oakland Park, Florida
33334

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____	Name and Title: <u>FILED</u>
Address _____	Address: <u>13 NOV -1 PM 12: 04</u>
_____	<u>SECRETARY OF STATE</u>
_____	<u>TALLAHASSEE, FLORIDA</u>

ARTICLE VI REGISTERED AGENT

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

Name: Frank N Bonuso

Address: 4360 NE 5th Terrace
Oakland Park, Florida 33334

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Frank N Bonuso

Address: 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

Frank N Bonuso
 Required Signature/Registered Agent

10-30-2013
 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.

Frank N Bonuso
 Required Signature/Incorporator

10-30-2013
 Date