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

Email Address:\_\_\_

## FLORIDA PROFIT/NON PROFIT CORPORATION A & M MOORE CONSULTING CORP.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 1       |
| Page Count            | 03      |
| Estimated Charge      | \$78.75 |

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Help

Dassile Thompson , 2/9/2020

| •  | ARTICLES OF IN<br>In compliance with Chapter 607  | CORPORATION<br>and/or Chapter 621, F.S. (Pro                      | fit)                      |
|--|---|---|---------------------------|
| ARTICLE I NA<br>The name of the cor  | IME   |   |                           |
| ARTICLE II PH  | <u>EINCIPAL OFFICE</u><br>Principal <u>street</u> address<br>PRESS BEND DR  | Mailing<br>SAME   | address, if different is: |
| APT 205  |   | SAME  |                           |
| POMPANO BEAC   | H, FL 33069   |   |                           |
| ARTICLE III PU<br>The purpose for wh<br>AND PURPOSED   | <b>RPOSE</b><br>ich the corporation is organized is:<br>TO BE TRANSACTED AND CARRIED OF   | VERAL NATURE OF THE   | BUSINESS AND OBJECTS      |
| ALL OF THE TH  | INGS HEREIN MENTIONED, AS FULLY   | AND TO THE RAME DOT   | ARE TO DO ANY AND         |
| MIGHT DO:  |   | AND TO THE SAME EXTE  | NT A.S NATURAL PERSONS    |
| 1) TRANSACT AN   | IY AND ALL LAWFUL BUSINESS  |   |                           |
|  | ATION SHALL FURTHER HAVE POWER  |   |                           |
| · · · · · · · · · · · · · · · · · · ·  |   |   |                           |
| To full the full E   | TUAL SUCCESSION BY IT'S CORPORATI   | E NAME "A & M MOORE (   | CONSULTING CORP'"         |
|  |   |   |                           |
| ARTICLE IV SH  | ARES  |   |                           |
| <u>ARTICLE IV</u> SH<br>The number of share  | ARES 1000<br>s of stock is:<br>TLAL OFFICERS AND/OR DIKECTORS   |   |                           |
| <u>ARTICLE IV</u> SH<br>The number of share  | ARES 1000<br>s of stock is:<br>TIAL OFFICERS AND/OR DIKECTORS   | Name and Title: DP  |                           |
| <u>ARTICLE IV SH</u><br>The number of share<br><u>ARTICLE V INI</u>                                      | ARES 1000<br>s of stock is:<br>TIAL OFFICERS AND/OR DIKECTORS   |   |                           |
| ARTICLE IV SH<br>The number of share<br>ARTICLE V INI<br>Name and 7                                      | ARES 1000<br>s of stock is:<br><u>TIAL OFFICERS AND/OR DIRECTORS</u><br>Title:ALLEN N. MOORE  | Name and Title:   |                           |
| ARTICLE IV SH<br>The number of share<br>ARTICLE V INI<br>Name and 7                                      | ARES<br>a of stock is:<br>TIAL OFFICERS AND/OR DIRECTORS<br>TIME:<br>ALLEN N. MOORE<br>2222 NORTH CYPRESS BEND DR   | Name and Title:   |                           |
| ARTICLE IV SH<br>The number of share<br>ARTICLE V INI<br>Name and 7                                      | ARES<br>s of stock is:<br><u>TIAL OFFICERS AND/OR DIKECTORS</u><br>ALLEN N. MOORE<br>2222 NORTH CYPRESS BEND DR<br>APT 205<br>POMPANO BEACH, FL 33069<br>MELISA S. MOODE  | Name and Title: DP<br>Address:                                    |                           |
| ARTICLE IV SH<br>The number of share<br>ARTICLE V INI<br>Name and T<br>Address                           | ARES<br>s of stock is:<br><u>TIAL OFFICERS AND/OR DIKECTORS</u><br>ALLEN N. MOORE<br>2222 NORTH CYPRESS BEND DR<br>APT 205<br>POMPANO BEACH, FL 33069<br>MELISA S. MOODE  | Name and Title: DP<br>Address:                                    |                           |
| ARTICLE IV SH<br>The number of share<br>ARTICLE V INI<br>Name and T<br>Address<br>Name and T             | ARES<br>a of stock is:<br>TIAL OFFICERS AND/OR DIRECTORS<br>ALLEN N. MOORE<br>2222 NORTH CYPRESS BEND DR<br>APT 205<br>POMPANO BEACH, FL 33069<br>itle:<br>MELISA S. MOORE  | Name and Title: DP<br>Address:                                    |                           |
| ARTICLE IV SH<br>The number of share<br>ARTICLE V INI<br>Name and T<br>Address<br>Name and T             | ARES 1000<br>a of stock is:<br>TIAL OFFICERS AND/OR DIRECTORS<br>ALLEN N. MOORE<br>2222 NORTH CYPRESS BEND DR<br>APT 205<br>POMPANO BEACH, FL 33069<br>itle:<br>MELISA S. MOORE<br>2222 NORTH CYPRESS BEND DR                   | Name and Title: DP<br>Address:                                    |                           |
| ARTICLE IV SH<br>The number of share<br>ARTICLE V INI<br>Name and T<br>Address<br>Name and T             | ARES 1000<br>s of stock is:<br>TIAL OFFICERS AND/OR DIRECTORS<br>ALLEN N. MOORE<br>2222 NORTH CYPRESS BEND DR<br>APT 205<br>POMPANO BEACH, FL 33069<br>MELISA S. MOORE<br>2222 NORTH CYPRESS BEND DR<br>POMPANO BEACH, FL 33069 | Name and Title: DP<br>Address:                                    |                           |
| ARTICLE IV SH<br>The number of share:<br>ARTICLE V INI<br>Name and T<br>Address<br>Name and T<br>Address | ARES 1000<br>s of stock is:<br>TIAL OFFICERS AND/OR DIRECTORS<br>ALLEN N. MOORE<br>2222 NORTH CYPRESS BEND DR<br>APT 205<br>POMPANO BEACH, FL 33069<br>MELISA S. MOORE<br>2222 NORTH CYPRESS BEND DR<br>POMPANO BEACH, FL 33069 | Name and Title: DP<br>Address:<br>Name and Title: DVP<br>Address: |                           |

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| Name and T  | itle:Name and Title:   |      |
|---|--|------|
| Address   | Address:   |      |
|   |  |      |
|   |  |      |
| <u>ARTICLE VI REC</u><br>The <u>name and Florid</u> | <b><u>EISTERED AGENT</u></b><br>la street address (P.O. Box NOT accentable) of the regiment of the second street of the second | . 20 |

ox NOT acceptable) of the registered agent is: MELISA S MOORE Name: 2222 NORTH CYPRESS BEND DR APT 205 Address: POMPANO BEACH, FL 33069

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

| Name:    | ALLEN N. MOORE             |  |
|----------|----------------------------|--|
| Address: | 2222 NORTH CYPRESS BEND DR |  |
|          | POMPANO BEACH, FL 33059    |  |

## ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing:

(OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

. Hoore

Required Signature/Registered Agent

12/08/2020

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 \$.817.155, F.S.

Required Signature/Incorporator

12/08/2020

Date

Date