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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MS

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Moss Real Estate, Inc.

Please Debit FCA000000003 For: 70

Thank you Seth Neeley



Signature

Requested by:

Name

Date

Time

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172 Parker Printing - Tallahassee, FL 32301

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COVER LETTER

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

SUBJECT: Moss Real Estate, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Gregory S. Oropeza

Name (Printed or typed)

221 Simonton Street

Address

Key West, FL 33040

City, State & Zip

305-294-0252

Daytime Telephone number

terrafirmo1@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)

ARTICLE I NAME

The name of the corporation shall be: Moss Real Estate, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1201 White Street, Suite 101

Key West, FL 33040

Mailing address, if different is:

P.O. Box 2461

Key West, FL 33045

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct a for profit business in the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Randall G. Moss, President

Address P.O. Box 2461

Key West, FL 33045

Name and Title: Randall G. Moss, Secretary/Treasurer

Address: P.O. Box 2461

Key West, FL 33045

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Gregory S. Oropeza, Esq.

Address: 221 Simonton Street

Key West, FL 33040

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Randall G. Moss

Address: P.O. Box 2461

Key West, FL 33045

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

Gregory S. Oropeza

ABF16C033E074E3

Required Signature/Registered Agent

08/14/2024

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.

Randall G. Moss

3DFF139A493140C

Required Signature/Incorporator

08/14/2024

Date