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FLORIDA DIVISION OF CORPORATIONS  
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TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: FAS-T CORP. AGENTS, INC.  
CONTACT: LIDIA FERNANDEZ  
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NAME: MOORE SOLUTIONS OF MIAMI, INC.  
AUDIT NUMBER.....H97000004002  
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.  
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nc 3/10/97



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

March 10, 1997

FAS-T CORP. AGENTS, INC.

SUBJECT: MOORE SOLUTIONS, INC.  
REF: W97000005490

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name DOES NOT constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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CONFLICTS WITH MOORE SOLUTIONS, P96000068533, FILED 08/15/96, PORT ST. LUCIE, FL

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Dana Calloway  
Document Specialist

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
MOORE SOLUTIONS OF MIAMI, INC.

We, the undersigned, are desirous of forming a corporation under the laws of the State of Florida, such laws that are applicable to corporations for profit, and respectfully petition the Secretary of State for approval of such incorporation under the following proposed Certificate of Incorporation.

ARTICLE I

NAME

The name of this corporation shall be MOORE SOLUTIONS OF MIAMI, INC. and its principle place of business shall be 19675 SW 264 ST HOMESTEAD, FL 33031-1769. and any other location that the board of directors may deem appropriate.

ARTICLE II

RESIDENT AGENT

The resident agent of the corporation shall be WILLIAM MOORE 19675 SW 264 ST HOMESTEAD, FL 33031-1769

ARTICLE III

GENERAL NATURE OF BUSINESS

The general purpose or object to be transacted, promoted or carried on by this corporation is any activity or business permitted under the laws of the United States and of the State Florida.

ARTICLE IV

SHARES OF STOCK - NUMBER

The maximum number of shares of stock that the corporation is authorized to have outstanding at any time is five hundred (500) of common stock of the par value for \$1.00 per share.

ARTICLE V

AMOUNT OF CAPITAL

The amount of capital with which the corporation will begin business will be a minimum of five hundred dollars (\$500.00).

Prepared by: Accounts Ltd  
17891 South Dixie Hwy  
Suite G  
Miami, Fl 33157  
(305) 232-1640

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ARTICLE VI

DURATION

This corporation is to have perpetual existence, commencing upon the approval by the Secretary of State of this certificate of incorporation.

ARTICLE VII

DIRECTORS

The affairs of the corporation will be managed by 2 Director. The names and addresses of the individuals who are to serve as directors until new directors are elected at the shareholders meeting are:

<u>NAME</u>	<u>ADDRESS</u>
WILLIAM MOORE	19675 SW 264 ST. HOMESTEAD, FL 33031-1769
VALERI VELLANTI MOORE	19675 SW 264 ST HOMESTEAD, FL 33031-1769

ARTICLE VIII

OFFICERS

The names and addresses of the individuals who will serve as the initial officer of the corporation until new officers of the corporation are appointed at the time of the first meeting of the shareholders are as follows:

<u>NAME</u>	<u>ADDRESS</u>
WILLIAM MOORE (PRESIDENT)	19675 SW 264 ST
VALERI VELLANTI MOORE (SEC/TRES)	19675 SW 264 ST HOMESTEAD, FL 33031-1769

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We, the undersigned, being the original subscribers to this certificate of incorporation, do hereby make, subscribe, acknowledge and file this certificate and certify that the facts stated herein are true, and have hereunto set my hand and seal this 6 day of MARCH 1997.

William Moore  
WILLIAM MOORE

Valeri Vellanti Moore  
VALERI VELLANTI MOORE

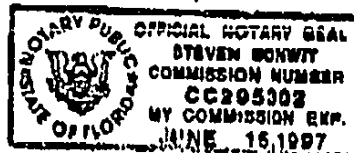
STATE OF FLORIDA

COUNTY OF DADE

BEING IT REMEMBERED that on this 6 day of MARCH 1997, personally came before me, a notary public of the State of Florida, the party to the foregoing certificate of incorporation, known to me personally to be such, and acknowledged the said certificate to be the acts and deeds of the signer, and that the facts herein are truly set forth.

Given under my hand and seal the day and year aforesaid.

BY ME



CERTIFICATE OF DESIGNATION

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CERTIFICATE OF DESIGNATION  
REGISTERED AGENT REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/ registered agent, in the State of Florida.

1. The name of the corporation is MOORE SOLUTIONS OF MIAMI, INC.
2. The name and address of the registered agent and office  
WILLIAM MOORE 19675 SW 264 ST HOMESTEAD, FL 33031-1769

SIGNATURE

*William Moore*

TITLE

*President*

DATE

*3-6-97*

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIC CAPACITY. I FURTHER AGREED TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

*William Moore*

DATE

*3-6-97*

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TALLAHASSEE, FLORIDA

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