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

M S M (Proposed corpora	INC lic name - must include suff	ix)		
	, -	-05/05/9701 *****78.75	タマーー1 127008 *****78.75	
und one(1) copy of the articles \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate		
WILLIAM SCITI	USTER I or typed)		_	
750 ROOSEVELT BLUD Address TARPON SORIALGS GL 20189				
(813) 934-0	794	<u></u>	를 찾는 22.E	
	sind one(1) copy of the article \$78.75 Filing Fee & Certificate SCH Name (Printed Address ARPON SPRING City, State (813) 934-0	(Proposed corporate name - must include suff TO and one(1) copy of the articles of incorporation and a composition and a composition and a composition a	(Proposed corporate name - must include suffix) 700021552 -05/05/9701 *****78.75 and one(1) copy of the articles of incorporation and a check for: \$\sum_{\$\text{\$\tex	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MSMI, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

950 ROSEVELT BLUD. TARPON SPRINGS, FL 34689

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WILLIAM A. SCHUSTER 950 ROOSEVELT BLUD. TARPON SPRINGS, FL 34689

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

WILLIAM A SCHUSTER - 950 ROOSEVELT BLUD, TARPON SPRINGS, FL.
34689

The undersigned incorp	orator(s) has(have) executed these Articles of Incorporation this
30 ^{1H} day of	APRIL , 1997.
(An additional article m	ust be added if an effective date is requested.)
4	William a Sohuster Signature
-	Signature
	Signature
	Control of
	Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF 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	of the corporation isMS MI, Inc	
2. The name	and address of the registered agent and office is:	SE
	WILLIAM A. SCHUSTER	T HAY -
	950 ROSEVELT BLUP. (P. O. BOX OF MAIL Drop BOX NOT ACCEPTABLE)	PH 3:
	TARPON SPRINGS, FL. 34689 (CITY/STATE/ZIP)	RATIONS 3:58

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 accept the appointment as registered agent and agree to act in this capacity. I further agree 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 obligations of my position as registered agent.

William a Soluisler 4/30/97
(SIGNATURE) (DATE)