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FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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DIVISION OF CORPORATIONS ·0:

FAX #: (850)922-4001

ROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305)599-0839

IAME: M.S. MOVERS SERVICE, INC.

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.F

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PAGES.....

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** ENTER 'M' FOR MENU. **

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ARTICLE OF INCORPORATION

OF.

M.S. MOVERS SERVICE, INC.

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

ARTICLE I NAME

The name of the corporation shall be: M.S. MOVERS SERVICE, INC.

The principal place of business of this corporation shall be: 1368 SW. 17 ST. MIAMI, FL. 33135

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: $100 \times $10.00 = $1.000.00$

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

Prepared by: Basic Accounting Service 692 W. 29th St., #09
Hialeah, Fl 33012
(305) 887-4185

98 JAN 16 AM 8: 02
SECRETARY OF STATE
TALLAHASSEE FLORID

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ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

ENRIQUE MUNOZ 1868 SW. 17 ST. MIAMI, FL. 33135 DIRECTOR

ARTICLE VI INCORPORATOR (8)

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

ENRIQUE MUNOZ 1868 SW. 17 ST. MIAMI, FL. 33135 PRESIDENT, SECRETARY & TREASURER
100 shares

The tio	undersigne n this <u>16</u>	ed has (have) th. day of	executed January	these Article ,1998	of Incorpora
		·	_	Signature	/Title
			Signature/Title	Title	
			<u></u>	Signature	Title

CERTIFICATE OF DESIGNATION REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

	name of the corporation is:s. MOVERS SERVICE INC.
The	name and address of the registered agent and off
is	(Name)
•	1868 SW. 17 ST.
	(P. O. BOX NOT ACCEPTABLE)
	MIAMI, FL. 33135

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MY POSITION AS REGISTERED AGENT.

DATE 01-16-98