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FLORIDA DIVISION OF CORPORATIONS

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TO: DIVISION OF CORPORATIONS

FAX #:

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FROM: AL CLARK

ACCT#:

072100000173

CONTACT: AL CLARK

PHONE: (813)398-6011

FAX #:

(813) 528-7222

NAME: MOTION ENTERPRISES , INC.

AUDIT NUMBER..... H98000008496

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

CERT. OF STATUS..O

3 PAGES....

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ENTER SELECTION AND <CR>:

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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

MOTION ENTERPRISES, INC.

98 MAY -5 PH 2: 18
SECRETARY OF CTATE
TALLAHASSEE FLORID

ARTICLE II PRINCIPAL OFFICE

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

9539 STATE ROAD # 52 HUDSON ,FL.34667

ARTICLE III SHARES

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

1000 SHARES NO PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

prepared by:

Name: JOHN FISHER

Address 9539 STATE ROAD # 52 :

HUDSON,FL.34667

Accounting & Tax Help, INC. 8668 PARK BLVD Suite .A SEMINOLE, Florida 33777

PH # 813-863-4620

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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):

JOHN FISHER 9444 LORAS STREET NEW PORT RICHEY,FL.34654

The undersigned incorporator(s) has (have) executed these Articles of Incorporation t	his
5 Th day of, 19 9 €.	
(An additional article must be added if an effective date is requested.)	
X John Friday Signature	
Signature	
Signature	

Notarization is not required

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

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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

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MOTION ENTERPRISES, INC.

2. The name and address of the registered agent and office is:

Accounting & Tax Help, INC. (Name)

8668 PARK BLVD., Suite A (P.O. Box not acceptable)

SEMINOLE, Florida 33777 (City/State/Zip)

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.

(Signature) PRESIDENT

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

DATE_5-5-98

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