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SIVISION FILLED

99 MAY 26 PM 12: 12

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

SUBJECT:	CREW MOVEMENTS, INC. (Proposed corporate name - must include suffix)			Total
		ger i se i i i i i	900002887 -05/26/990 ******78.75	
Enclosed is an origir	nal and one(1) copy of the artic	cles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:		inted or typed)		· <u>-</u>
	1241 HARRISON STREET Address		r region to	
	HOLLYWOOD, FLORIDA 33019 City, State & Zip		2 marin	
	(954) 927-2922 Daytime Tel	ephone number	<u> </u>	

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

CREW MOVEMENTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

1241 HARRISON STREET HOLLYWOOD, FL 33019

ARTICLE III SHARES

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

1,000 SHARES COMMON STOCK NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

HERMAN LUSTIG 1241 HARRISON STREET HOLLYWOOD, FL 33019

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

HERMAN LUSTIG 1241 HARRISON STREET HOLLYWOOD, FL 33019

Signature/Incorporator
HERMAN LUSTIG

(An additional article must be added if an effective date is requested.)

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/Registered Agent

5 2 2 /G /G Date