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

Tallahassee, FL 323	314			
SUBJECT:	MOS/eg S EX (Proposed corpor	rate name - must include su	ffix)	
		8	00003047 -11/17/990 *****70.00	3187 )1068-001 *****70.00
Enclosed is an origin	nal and one(1) copy of the articles	s of incorporation and 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:	Monticello,	inted or typed)  130  ddress  1, 3234  tate & Zip	SECHETARY G. SIALE	APTROVED

(850) 997-3969 or 681-1/84 (n-3)

Daytime Telephone number

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.

PRINCIPAL OFFICE

ARTICLE I NAME	- 1 / L > 0 / 2 -	10
The name of the corporation shall be:	mosleystexton,	، ک

The principal place	e of business and maili	ng address of this	corporation shall be	<del>)</del> :	
14175	monroe		- <u>-</u>	***	
Talla. 7	1, 32304	***	· - <u>-</u> .	· - · · ·	•
ARTICLE III	SHARES		•		
The number of sha	ares of stock that this co	orporation is author	rized to have outsta	nding at any one t	ime is:
one					
ARTICLE IV	INITIAL REGIST	TERED AGEN	T AND STREET	r address	

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

(how most of the initial registered agent are:

(how

Roul Mosle
Signature/Incorporator

11 - 19 - 99Date

(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

11-17-99 Date