

**Power 2772**

OREGON SECRETARY OF STATE  
 ZARUS CORPORATE FILING SERVICE, INC.  
 (Requestor's Name)  
 3320 S.W. 87th AVENUE  
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 MIAMI, FLORIDA (305)552-5973  
 (City, State, Zip) (Phone #)  
 LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. PANOAKLAND, INC.  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

- ☒ Walk in    ☒ Pick up time 2.00    ☒ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

**FILED**  
 00 MAR 17 PM 2:37  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
**RECEIVED**  
 00 MAR 17 AM 11:15  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input checked="" type="checkbox"/>	Reinstatement
<input checked="" type="checkbox"/>	Trademark
<input checked="" type="checkbox"/>	Other

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 -03/17/00--01068--026  
 \*\*\*\*\*78.75 \*\*\*\*\*78.75

Examiner's Initials

**ARTICLES OF INCORPORATION**  
**OF**  
**PANOAKLAND, INC.**

**FILED**  
00 MAR 17 PM 2:37  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned incorporator 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 corporation shall be:

**PANOAKLAND, INC.**

**ARTICLE II. PRINCIPAL OFFICE**

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

419 WEST 49<sup>th</sup> STREET, SUITE 206  
HIALEAH, FLORIDA 33012

**ARTICLE III. CAPITAL STOCK**

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

1000 (ONE THOUSAND) SHARES, \$1.00 PAR VALUE EACH

**ARTICLE IV. INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is:

ALEJANDRA C. GORRIN  
419 WEST 49<sup>th</sup> STREET, SUITE 206  
HIALEAH, FLORIDA 33012

**ARTICLE V. INCORPORATOR (S)**

**The name and street address of the incorporator to these Articles of incorporation is:**

**ALEJANDRA C. GORRIN  
419 WEST 49<sup>th</sup> STREET, SUITE 206  
HALEAH, FLORIDA 33012**

**The Undersigned has executed these Articles of Incorporation this 15<sup>th</sup> day of March, 2000.**

**Director**  
  
**Signature / Title**

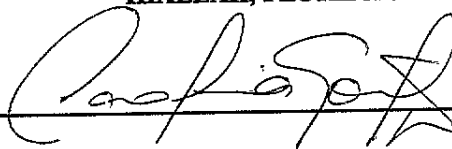
**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation organized under the laws of the States of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

- 1.- The name of the Corporation is: PANOAKLAND, INC.
- 2.- The name and address of the registered agent and office is:

ALEJANDRA C. GORRIN  
419 WEST 49<sup>th</sup> STREET, SUITE 206  
HIALEAH, FLORIDA 33012

Signature \_\_\_\_\_



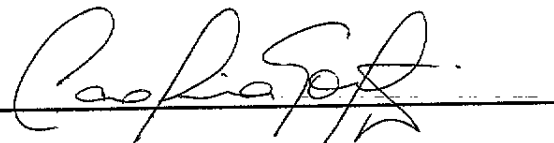
(Corporate Officer)

Title: Director

Date: 03/15/2000

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 RALATING 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 \_\_\_\_\_



03/15/2000

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