

P000000077284

TRANSMITTAL LETTER

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

600003338456--5
-07/27/00--01075--010
*****78.75 *****78.75

SUBJECT: O & M AMNAGEMENT, INC.

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

RAMON REYES

Name (Printed or typed)

5035 PALM AVE.

Address

HIALEAH, FL. 33012

City, State & Zip

(305)822-0669

Daytime Telephone number

FILED
00 AUG 15 AM 8:42
TALLAHASSEE, FLORIDA

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

T. Burch AUG 16 2000



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 1, 2000

RAMON REYES
5035 PALM AVE
HIALEAH, FL 33012

SUBJECT: O & M MANAGEMENT, INC.
Ref. Number: W00000019021

We have received your document for O & M MANAGEMENT, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6928.

Tim Burch
Document Specialist

Letter Number: 900A00041588

FILED
00 AUG 15 AM 8:42
SHERIFF'S OFFICE
TALLAHASSEE, FLORIDA

<u>ARTICLE I</u>	<u>NAME</u>
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O & M REAL ESTATE MANAGEMENT, INC.

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

ARTICLE III SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

110 E. 19 ST.
HIALEAH, FL. 33010

The name and address of the incorporator to these Articles of Incorporation are:

110 E. 19 ST.
HIALEAH, FL. 33010

110 E. 19 ST.
HIALEAH, FL. 33010

Beatriz Cardenas
Signature/Incorporator

07/21/2000
Date

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.

Beatriz Cardenas
Signature/Registered Agent

07/21/2000
Date