

P00000097054

TRANSMITTAL LETTER

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

100003409821--9
-09/29/00--01070--016
*****78.75 *****78.75

75

SUBJECT: OCHANLA ENTERPRISE CORP
(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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: FLORIDA INSURANCE & ACCT SERV
Name (printed or typed)
P.O. BOX 651221
Address
MIAMI FL 33265
City, State & Zip
(305) 461-4884
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 OCT 13 PM 12:25

FILED

Please return the Articles to the address above.

Thank you

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

T BROWN OCT 16 2000



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

October 4, 2000

FLORIDA INSURANCE & ACCT SERV
P.O. BOX 651221
MIAMI, FL 33265

SUBJECT: OCHANLA ENTERPRISE CORP
Ref. Number: W00000024034

We have received your document for OCHANLA ENTERPRISE CORP 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 document must have original signatures.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

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) 487-6933.

Teresa Brown
Corporate Specialist

Letter Number: 900A00052492

ARTICLES OF INCORPORATION

FILED
00 OCT 13 PM 12:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

OCHANLA ENTERPRISE CORP

ARTICLE II PRINCIPAL OFFICE

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

3736 WEST 12TH AVE
HIALEAH, FL. 33012

ARTICLE III SHARES

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

ONE HUNDRED (100) SHARES OF COMMON STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ROLANDO ALVAREZ
3736 WEST 12TH AVE
HIALEAH, FL. 33012

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ROLANDO ALVAREZ
3736 WEST 12TH AVE
HIALEAH, FL. 33012

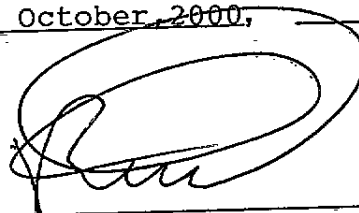
ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

ROLANDO ALVAREZ
3736 WEST 12TH AVE
HIALEAH, FL. 33012
PRESIDENT

SONIA ALVAREZ
3736 WEST 12TH AVE
HIALEAH, FL. 33012
VICE-PRESIDENT

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 11th day of October, 2000.



Signature
ROLANDO ALVAREZ

Signature

Signature

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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.

FILED
00 OCT 13 PM 12:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. The name of the corporation is: OCHANLA ENTERPRISE CORP

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

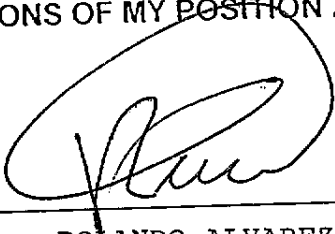
ROLANDO ALVAREZ
(NAME)

3736 WEST 12TH AVE
(P.O. BOX NOT ACCEPTABLE)

HIALEAH, FL. 33012
(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


ROLANDO ALVAREZ

DATE OCTOBER 11, 2000