

TRANSMITTAL LETTER

P01000100832

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

SUBJECT: OPABOLA ENTERPRISES INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

000004640390--3
-10/18/01--01002--002
*****87.50 *****87.50

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: Kasali Opabola Jr
Name (Printed or typed)

450 West Caroline St Apt 2
Address

Tallahassee, FL 32301
City, State & Zip

(561) 436-3903
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 OCT 17 PM 3:46

APPROVED
AND
FILED

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

RECEIVED
01 OCT 17 PM 3:46
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

8/10/17

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: OPABOLA ENTERPRISES Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 450 West Carolina St Apt 2
Tallahassee, FL 32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Opabola Enterprises, is a
company ~~for~~ geared toward community
development, support and improvement.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es): Kasali Opabola ~ CEO
450 West Carolina St Apt 2
Tallahassee, FL 32301

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Kasali Opabola
450 West Carolina St Apt 2
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kasali Opabola
450 West Carolina St Apt 2
Tallahassee, FL 32301

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

[Signature]
Signature/Registered Agent

10/17/01
Date

[Signature]
Signature/Incorporator

10/17/01
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 OCT 17 PM 3:46

APPROVED
AND
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