P02 880034756

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

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SUBJECT: MANGGEMENT, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
	(PROPOSED CORPORAT	E NAME – <u>MUST INCLU</u>	IDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	les 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:	AWENS ALPI	JONSE Printed or typed)		i
3014 SW 67 LANE				02 H
-	Minaman, FL 33003 City, State & Zip			DE MAR 25 AM 8: 08
Daytime Telephone number				A 8: 08

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



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: Oppoint Management, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3014 SW 67 LANE, Minaman, FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Property MANAGEMENT

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

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

AWENS Alphanse 3014 SW 67 Lane MIRAMAR, FL 33023

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

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/Registered/Agent

Date

Signature/Incorporator

Date