

PO2000044312

TRANSMITTAL LETTER

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

500005293155--2

-04/18/02--01060--006

*****70.00 *****70.00

SUBJECT: OMEGA TRANSFER, 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

☐ \$78.75

☐ \$122.50

☐ \$131.25

FROM: JAMES S. ALLEY
Name (printed or typed)

3837 NORTHDAL BLVD.
Address

TAMPA, FL 33624
City, State & Zip

423-292-8326
Daytime Telephone number

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 APR 18 AM 7:41

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

ARTICLES OF INCORPORATION

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: OMEGA TRANSFER, INC

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ARTICLE II PRINCIPAL OFFICE

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

3837 NORTHDAL BLVD.
TAMPA, FL 33624

ARTICLE III SHARES

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

100 SHARES - NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is

JAMES S. ALLEY
3837 NORTHDAL BLVD.
TAMPA, FL 33624

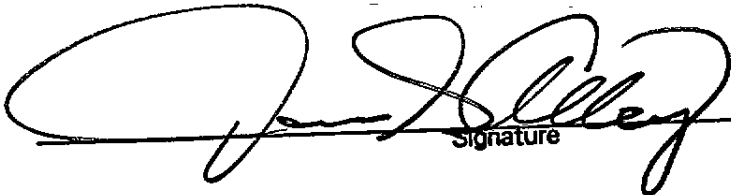
ARTICLE V INCORPORATOR(S)

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

JAMES S. ALLEY
3837 NORTHDALÉ BLVD.
TAMPA, FL 33624

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20TH day of MARCH, 19 2002 .



Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

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

Pursuant to the provisions of Section 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.

1. The name of the Corporation is:

OMEGA TRANSFER, INC.

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

JAMES S. ALLEY

(Name)

3837 NORTHDAL BLVD.

(P.O. Box NOT acceptable)

TAMPA, FL 33624

(City/State/Zip)

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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

4/17/02
Date