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(Re	equestor's Name)	,
(Ad	(dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
,—-		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ne 4/16

TRANSMITTAL LETTER

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

SUBJECT: SMITH OMARI & ESHE INC.			
(PROPOSED CORPORAT	'E NAME – <u>MUST INCL</u>	UDE SUFEIX)	
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	d a check for:	
□ \$70.00	\$78.75	□ \$87.50	
Filing Fee Filing Fee	Filing Fee	Filing Fee,	
& Certificate of Status	& Certified Copy	Certified Copy	
		& Certificate of	
		Status	
	ADDITIONAL CO	PY REQUIRED	
•			
FROM: WILLIE SMITH JR.			
Name (Name (Printed or typed)		
D O BOV 262024			
	P.O. BOX 262831		
A	Address		
T44D4 FI 0000F 0004			
TAMPA, FL 33685-2831			
City, State & Zip			
942 055 6460			
813-855-6462	tenhone number		

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

FILED

ARTICLES OF INCORPORATION

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

03 APR 14 AM 9: 37

ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SMITH OMAR! & ESHE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 11802 COUNTRY COVE WAY TAMPA, FL 33635 P.O.BOX 262831 TAMPA, FL 33685-2831

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LEGAL PURPOSES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): WILLIE SMITH JR. OWNER P.O. BOX P.O. BOX 262831 TAMPA, FL 33685-2831

ARTICLE VI REGISTERED AGENT

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

WILLIE SMITH JR. 11802 COUNTRY COVE WAY TAMPA, FL 33635

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

WILLIE SMITH JR P.O. BOX 262831 TAMPA, FL 33685-2831

***************	**********
Having been named as registered agent to accept service of process for the above st certificate, I am familiar Ath and accept the appointment as registered agent and ag	ated corporation at the place designated in this tree to act in this capacity
Wash	04/10/2003
Signature/Registered Agent	Date
WWY.	04/10/2003
Signature/Incorporator	Date