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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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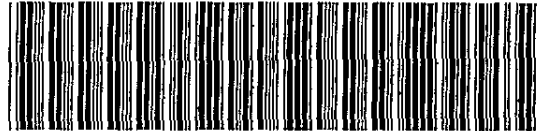
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/05/03--01083--010 **97.50

FILED
03 MAY -5 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 12 2003

TRANSMITTAL LETTER

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

SUBJECT: OMEGA DELIVERY SERVICE INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: ANTONIO ROMAN
Name (Printed or typed)

1118 154 RD, North
Address

JUPITER FL. 33478
City, State & Zip

561- 748-1648
Daytime Telephone number

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:

OMEGA DELIVERY SERVICE INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P O BOX 1939
JUPITER FL 33468-1939

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO MAKE DELIVERY

ARTICLE IV SHARES

The number of shares of stock is:

3

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ANTONIO ROMAN - Pres.
MARLENE ROMAN - Vice Pres.
ANTHONY L. ROMAN Sec. TREASURER
11180 154 Rd N.
Jupiter FL 33478

ARTICLE VI REGISTERED AGENT

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

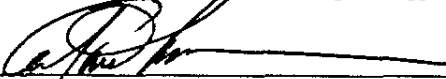
ANTONIO ROMAN
11180 154 Rd N.
Jupiter FL 33478

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANTONIO ROMAN
11180 154 Rd N.
Jupiter FL 33478

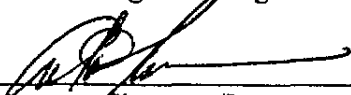
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4-30-03

Date



Signature/Incorporator

4-30-03

Date

03 MAY -5 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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