

PO6000030887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

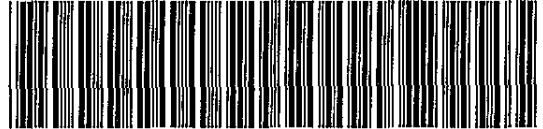
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500066797295

03/01/06--01017--003 **78.75

SEALING FILE
TALLAHASSEE, FLORIDA

06 MAR -1 PM 12:47

FILED

J. Shivers MAR 02 2006

MAYORQUIN ACCOUNTING

FRANCISCO MAYORQUIN
4510 W. HIAWATHA
TAMPA, FL 33614

Telephone (813) 884-8103

February 27, 2006

Secretary of State
Division of Corporations
P.O. BOX 6327
Tallahassee, Florida 32314

Dear Sirs:

I am enclosing the Certificate of Incorporation for:

EL OASIS, INC.

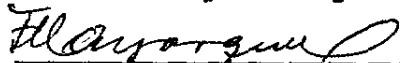
together with signed resident agent Form, for your approval.

Also enclosed is a check to cover expenses as required by the State of Florida.

Check No, 149 for the amount of \$ 78⁷⁵

If additional information is needed regarding at this matter, please, let me know at your earliest convenience.

Respectfully


Francisco Mayorquin
4510 W. Hiawatha St.
TAMPA, Florida 33614

06 MAR - 1 PM 12:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Articles of Incorporation
Of

EL OASIS, INC.

The undersigned, for the purpose of forming a Corporation under the Florida General Act, does hereby adopt the following Articles of Incorporation:

Article I

The name of the Corporation is EL Oasis, Inc.

Article II

The duration of the Corporation is perpetual.

Article III

The purpose for which the Corporation is organized are:

- A- To carry on and transact any lawful business.
- B- To acquire, own, use, convey, and otherwise dispose of and Deal in Real Property, and other personal property or any interest therein.
- C- To enter into any lawful arrangements for sharing profits and losses in any Of any transactions.

Article IV

The Corporation may issue 100 (ONE Hundred) of Voting Common Stock of Par value \$ 5.00 each Share with preemptive Rights preserved

Article V

The street address of the initial office of the Corporation is 5113 Gateway Dr. Tampa, Fl. 33615

And the name of its initial Registered Agent is Leslie L. Triana
At 5113 Gateway Dr., Tampa, Fl. 33615

Having been named as Registered Agent and accept service of process for the above stated Corporation at the place designate in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent's signature

Leslie L. Triana

LESLIE L. TRIANA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 MAR - 1 PM 12:47

FILED

Article VI

The names and addresses of the initial Directors of the Corporation are:

Name		Address
Lealie L. Triana	President	5113 Gateway Dr. Tampa Fl. 33615
Jose M. Discua	Secretary	5113 Gateway Dr. Tampa, Fl. 33615

Article VII

The names and addresses of the initial Officers of the Corporation are:

Name		Address
Leslie L. Triana	75 shares	5113 Gateway Dr. Tampa, Fl. 33615
Jose M. Discuas	25 shares Article VIII	5113 Gateway Dr. Tampa, Fl. 33615

The name and address of the Incorporator of this Corporation is:

Leslie L. Triana

Signature/Incorporator

February 27, 2006
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 MAR - 1 PM 12:47

FILED

State of Florida
County of Hillsborough

Before me, a Notary Public duly authorized in the State of Florida and county named above to make acknowledgments, personally appeared Mrs. Leslie L. Triana----- Personally known and known to me the person described as Incorporator in and who executed the foregoing Articles of Incorporation, and acknowledged before me that she executed the same and subscribed to these Articles of Incorporation, and who did take an Oath.

Witness my hand and official Seal in the County and State named above the 27th day of February, 2006.

Francisco Mayorquin
Francisco Mayorquin
Notary Public, State of Florida

PERSONALLY KNOWN ☒
OR PRODUCED IDENTIFICATION ☐
TYPE OF IDENTIFICATION PRODUCED _____

FRANCISCO MAYORQUIN
Notary Public, State of Florida
My comm. exp. June 26, 2006
Comm. No. DD 110085