

PO6000147224

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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06 NOV 27 AM 10:57
SEC. JAY W. STATE
TALLAHASSEE, FLORIDA

J. Shivers NOV 28 2006

COVER LETTER

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

SUBJECT: OPTIMAL LAB, 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: **OPTIMAL LAB, INC.**

Name (Printed or typed)

PO BOX 441181

Address

MIAMI, FL 33144

City, State & Zip

786-573-2996

Daytime Telephone number

SECTION OF STATE
TALLAHASSEE, FLORIDA

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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:

OPTIMAL LAB, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

275 FOUNTAINBLEAU BLVD - SUITE 165
MIAMI, FL 33172

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MARLUZ RODRIGUEZ - PRESIDENT
16481 SW 81 CIRCLE LANE #68
MIAMI, FL 33193

LILIANA PERDOMO - VICE PRESIDENT
13820 SW 175 TERRACE
MIAMI, FL 33177

NELYDA MEDEROS - TREASURER
19701 SW 197TH AVENUE
MIAMI, FL 33187

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

NELYDA MEDEROS
19701 SW 197TH AVENUE
MIAMI, FL 33187

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NELYDA MEDEROS
19701 SW 197TH AVENUE
MIAMI, FL 33187

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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



Signature/Incorporator



Date



Date