

PO7000119721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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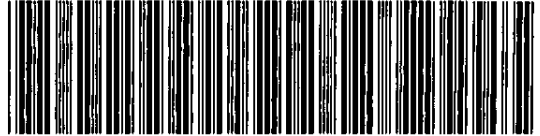
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APPROVED
AND
FILED
07 NOV - 1 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: OMI-OLORUM, 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: ROBERTO U FERNANDEZ

Name (Printed or typed)

8000 W 28CT # 103

Address

HIALEAH GARDENS, FL 33018

City, State & Zip

786-473-2516

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:

OMI-OLORUM, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
4325 N.W. 197 ST MIAMI, FL 33055

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
BODY SHOP

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares of \$1.00 each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

**PRESIDENT- Jaime Martin
4325 NW 197th STREET
MIAMI, FL 33055**

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

JAIME MARTIN- 4325N.W. 197th ST
MIAMI, FL 33055

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERTO U FERNANDEZ
8000 W 28th CT # 103
HIALEAH GARDENS, FL 33055

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

Jaime Martin

Signature/Registered Agent

10-27-07

Date

Roberto Fernandez

Signature/Incorporator

10-27-07

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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