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(R	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Bi	usiness Entity Name)			
(De	ocument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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	Office Use Only			
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2007 DEC 19 PN 4: 25
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

T. Bureh DEC: 1 9 2007.

COVER LETTER

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

SUBJECT:		DESIGNS, IN	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED
FROM:	NII O OF	CUNOR (Printed or typed)	
-	822 SPRING	CAVERN AVENU	! <i>E</i>
-		Y FLORIDA State & Zip	32763
· -	(407) 927 -	•	

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)

FILED

.s. (Fiorit)

ARTICLE I NAME

The name of the corporation shall be:

OKUWEB DESIGNS, INC.

SECRETARY OF STATE
TAIL AID SSEE, FLORIDA

2007 DEC 19 PM 4: 25

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

\$22 SPRING CAVERN AVENUE

ORANGE CITY FL 32763

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Building custom websites for businesses and individuals, as well as Organizations. Custom designs will also include domain name searches, web hosting, logo designing and database design and administration.

ARTICLE IV SHARES

The number of shares of stock is:

2 shares of stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Name: Nii OKUNOR

Title: DWNER and President

Address: 822 Spring Cavern Ave, Orange City, FL 32763

ARTICLE VI REGISTERED AGENT

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

Sylvia OKUNOA 822 SPRING CAVERN AVE ORANGE CITY FL 32763

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NII OKUNDA 822 SPRING CAUERN AVE ORANGE CITY FL 32763

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

Sylina Ckuno 12-18-07
Signature/Registered Agent Date

12/18/2007
Signature/Incorporator Date