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**Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
O.P.A. OIL INC.**

Certificate of Status	0
Certified Copy	1
Page Count	01
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Corporate Filing Menu

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T. Burch OCT 21 2010

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME O.P.A. OIL INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

2489 N.W. 7th Street

Miami, FL 33125

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any and all Lawful Activities

ARTICLE IV SHARES

The number of shares of stock is 1,000. @ \$1 Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pedro Erigoyen, President

Address: 2489 N.W. 7th Street

Miami, FL 33125

Name and Title: _____

Address: _____

Name and Title: Odalis Flores, Secretary & Treasurer

Address: 2489 N.W. 7th Street

Miami, FL 33125

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Pedro Erigoyen

Address: 2489 N.W. 7th Street

Miami, FL 33125

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Pedro Erigoyen

Address: 2489 N.W. 7th Street

Miami, FL 33125

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

Pedro Erigoyen
Required Signature/Registered Agent

10/20/2010

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Pedro Erigoyen
Required Signature/Incorporator

10/20/2010

Date

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