P12000035283

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
W12-17778		





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03/28/12--01010--002 **70.00





COVER LETTER

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

SUBJECT: Ohanian, Inc.		
(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	<u>LUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL CO	OPY REQUIRED
froм: <u>Donald N. Jacobson,</u> P.A.		
Name	(Printed or typed)	_
120 S. Olive Ave., Suite 2	208	
A	Address	······································
West Palm Beach, FL 3	3401 State & Zip	
561-835-8436 Daytime Te	elephone number	
donald@dnilaw.com E-mail address: (to be used	for future annual report	notification)

NOTE: Please provide the original and one copy of the articles.



March 29, 2012

DONALD N. JACOBSON, P.A. 120 S. OLIVE AVE., SUITE 208 WEST PALM BEACH, FL 33401

SUBJECT: OHANIAN, INC. Ref. Number: W12000017778

We have received your document for OHANIAN, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 412A00010553

ARTICLES OF INCORPORATION

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

The name of the corporation shall be: OHANIAN, Iuc.	BILED:
ARTICLE II PRINCIPAL OFFICE	and the state of t
Principal street address Mai	iling address, if digeren AFR 12 PM 1: 27
1170 Mill Pond Greens	
Done	TENDEST OF ON A CONTRACT OF THE STATE OF THE
Boynton Beach, FC 33473	The same of the same wants are a second of the
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
ARTICLE IV SHARES	
The number of shares of stock is: 100	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: Name and Title: Address: Address:	
Audiess. Det of Official Viva	
- 1170 Mill Pond Greens	
Name and Title: 13 94 wton Beach, Phame and Title:	
Address: Address:	
Name and Title	
Name and Title: Name and Title: Address: Address:	
Addiess.	
ARTICLE VI REGISTERED AGENT	
TO THE STATE OF TH	s:
Name: JONACINE MCOBSON, DA. 12	ach, FC. 33401
Address: C/ 300 1 10 Cf 10 11 11 Ro	3 01 00 100
Ste aug west faim be	acu 182.55401
ARTICLE VII INCORPORATOR	- 1 /
The name and address of the Incorporator is:	
Name: Beng OHANAN	. 0 / /-
Address:	ynten Beach FE 33475
11-1-14/11/1/10/10 CAREUS 1/00)	70000 18 000071 37 173
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	ee to act in this capacity
7 101 0	~ /. /r-
Required Signature/Registered Agent	16/12
Required Signature/Registered Agent	/ Date
I submit this document and affirm that the facts stated herein are true. I am aware that	
document to the Department of State constitutes a third degree felony as provided for in s.8	817.155, F.S / _ /
5 de	216/12
Required Signature/Incorporator	Date '
required digitation theorporator	