

PI2000086781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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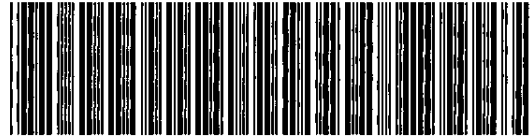
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

COVER LETTER

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

SUBJECT: ALPHA OMEGA BAIL BONDS Corp
(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: MARGARITA Oppermann
Name (Printed or typed)

4066 Evans Ave, Ste 23
Address

FT MYERS, FL 33901
City, State & Zip

239-277-5747
Daytime Telephone number

MARGARITAOPPERMANN@gmail.com
E-mail address: (to be used for future annual report notification)

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:

Alpha Omega BAIL Bonds Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4066 Evans Ave
Suite 23
FT Myers, FL 33901

Mailing address, if different is:

P.O. Box 1051
ESTERO, FL 33929

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFESSIONAL Corporation

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRESIDENT / MARGARITA OPPERMAN W
Address: 4066 Evans Ave
Suite 23
FT Myers, FL 33901

Name and Title: _____
Address: _____

Name and Title: ORIN OPPERMAN / Vice
Address: 4066 Evans Ave
Suite 23
FT Myers, FL 33901

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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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:

Name: MARGARITA OPPERMAN W
Address: 4066 Evans Ave, Ste 23
FT Myers, FL 33901

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARGARITA OPPERMAN W
Address: 4066 Evans Ave, Ste 23
FT Myers, FL 33901

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

Margarita Opperman
Required Signature/Registered Agent

10/08/12
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.

Margarita Opperman
Required Signature/Incorporator

10/08/12
Date