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## FLORIDA PROFIT/NON PROFIT CORPORATION OMPAF CARRIER, INC

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June 18, 2014

FLORIDA DEPARTMENT OF STATE

LAZARUS CORPORATE FILING SERVICE, Division of Corporations

SUBJECT: OMPAF CARRIER, INC

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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Flurida Business Corporation Act; Hereby adopt(s) the following Articles of Incorporation.

#### **ARTICLE I NAME**

The name of the corporation shall be: OMPAF CARRIER, INC

#### ARTICLE II PRINCIPAL OFFICE

The principle place of business and mailing address of this corporation shall be:

400 SW 58 AVE MIAMI,FL 33144

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

FIVE (500) HUNDRED SHARES ONE DOLLAR (1) PER VALUE COMMON STOCK

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

OVEIDI PEREZ CHAVEZ

400 SW 58 AVE

MIAMI, FL 33144

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### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

OVEIDI PEREZ CHAVEZ 400 SW 58 AVE MIAMI,FL 33144

#### ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

OVEIDI PEREZ CHAVEZ ( PRESIDENT & SECRETARY)

400 SW 58 AVE MIAMI, FL 33144

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 16 day of JUNE 2014.

Signature

Signature

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## CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1 The name of the corporation is:
  OMPAF CARRIER, INC
- 2. The name and address of the registered agent and office is:

OVEIDI PEREZ CHAVEZ

(NAME)

400 SW 58 AVE

(P.O. BOX NOT ACCEPTABLE)

(CITY/STATE/ZIP)

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE 06/16/2014

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