

PIB 000026803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

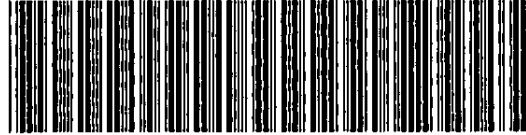
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2015 MAR 17 PM 4:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\* ce  
3/30/15

## COVER LETTER

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

**SUBJECT: O.M.G USED AUTO PARTS INC.**

(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: Julia Greenberg-Aguilar o/b/o MyUSAcorporation.com**

Name (Printed or typed)

**1 Radisson Plaza, Suite 800**

Address

**New Rochelle, NY 10801-5769**

City, State & Zip

**877-330-2677**

Daytime Telephone number

**andrewhepburn99@yahoo.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: O.M.G USED AUTO PARTS INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address3673 NW 19th StreetLauderdale Lakes, FL 33311

Mailing address, if different is:

3673 NW 19th StreetLauderdale Lakes, FL 33311**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

SALES OF AUTO PARTS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ANDREW HEPBURN - PRESIDENTAddress: 3673 NW 19TH STREETLAUDERDALE LAKES, FL, 33311Name and Title: ANDREW HEPBURN - TREASURERAddress: 3673 NW 19TH STREETLAUDERDALE LAKES, FL, 33311Name and Title: ANDREW HEPBURN - VICE PRESIDENTAddress: 3673 NW 19TH STREETLAUDERDALE LAKES, FL, 33311

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: ANDREW HEPBURN - SECRETARYAddress: 3673 NW 19TH STREETLAUDERDALE LAKES, FL, 33311

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL 32399

(cont.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: ANDREW HEPBURN

Address: 3673 NW 19TH STREET

LAUDERDALE LAKES, FL, 33311

**ARTICLE VII INCORPORATOR**

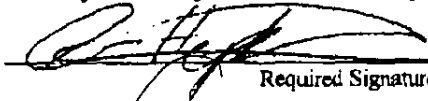
The name and address of the Incorporator is:

Name: MyUSACorporation.com

Address: 1 Radisson plaza, Suite 800

New Rochelle, NY 10801

*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*

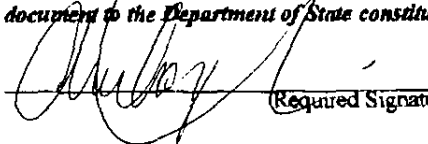


Required Signature/Registered Agent

03/10/2015

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.*



Required Signature/Incorporator

Date