

P11 00010690

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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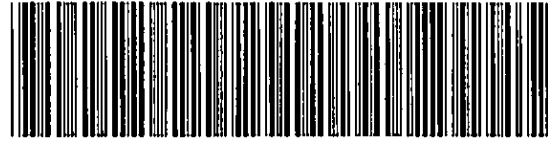
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 DEC 22 PM 12:28

N CULIGAN

DEC 26 2017

## COVER LETTER

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

**SUBJECT:** OASIS VENTURES, INC *DRP* *OR* *ATED*

(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:** ERIC M. HERNAEZ

\_\_\_\_\_  
Name (Printed or typed)

121 175TH TERRACE DRIVE EAST

\_\_\_\_\_  
Address

REDINGTON SHORES, FLORIDA 33708

\_\_\_\_\_  
City, State & Zip

203 543-9959

\_\_\_\_\_  
Daytime Telephone number

ERIC@HERNAEZ.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 18, 2017

ERIC M HERNAEZ  
121 175TH TERRCE DRIVE EAST  
REDINGTON SHORES, FL 33708

SUBJECT: OASIS VENTURES, INC.  
Ref. Number: W17000094467

We have received your document for OASIS VENTURES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

You need to resubmit form with a corrected name. NOTE adding (.) to name does not make it distinguishable.

Please return 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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 717A00024027



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## Detail by Entity Name

Rejected Filing

O.A.S.I.S. VENTURES, INC.

### Filing Information

Document Number W17000099477

Filed Date 12/17/2017

Expire at Usual Time Y

Penalty Fee 00.00

### Associated Document

Number	Document Type
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Filed By	ERIC M. HERNAEZ
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### Document Images

No images are available for this filing.

Florida Department of State, Division of Corporations

*Please change name to  
OASIS ADVENTURES, INC.*

*Thank you*

17 DEC 22 11:11:46  
INFORMATION

**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: OASIS Adventures, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
607 S. ALEXANDER STREET SUITE 205  
PLANT CITY, FLORIDA 33563

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: TO CONDUCT ALL LAWFUL BUSINESS FOR A PROFIT.

77 DEC 22 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE - FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: DIANE M HERNAEZ PRESIDENT

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

Address 11831 FROST ASTER DRIVE  
RIVERVIEW, FL 33579

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

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

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: JAMES W HAYS CPA CFP  
Address: 607 S. ALEXANDER STREET SUITE 205  
PLANT CITY, FL 33563

RECEIVED  
TALLAHASSEE FLORIDA  
NOV DEC 22 PM 12:22

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: ERIC M HERNAEZ  
Address: 121 175TH TERRACE DRIVE EAST  
REDINGTON SHORES, FL 33708

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

James W. Hays  
Required Signature/Registered Agent

11/17/2017  
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.*

[Signature]  
Required Signature/Incorporator

17 Nov 2017  
Date