Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Phone

Account Number : 120000000019

: (305)552-5973

Fax Number

: (305)675-5944

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

E=ail	Address:			

FLORIDA PROFIT/NON PROFIT CORPORATION **OMM INVESTMENT CORP**

Certificate of Status	0
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Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

- OMM TovestieN+ CORP
ARTICLE II PRINCIPAL OFFICE:
The principal street address and prailing address
B25 w 69 PL HIALEAG FL 33014
ARTICLE III SHARES: The number of shares of stock is:

Elionel Oslay MAYTIN (P)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
ELIDVEL OSLAY MARTIN
825 W 69 PL
Hialeah FL 33014
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
ELIOVEL OSLAY MARTIN
825 W (09 PL
Hialean FL 33014

Required Signatures:

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

Registered Agent 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.

Incorporator