

Key
P19000094185
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000366547 3)))



H190003665473ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

2019 DEC 20 12:45

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CRARY, BUCHANAN, BOWDISH, ET AL
Account Number : 076424001425
Phone : (772)233-4602
Fax Number : (772)223-4378

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

Email Address: lec@crarybuchanan.com

**DOMESTICATION
OPERATIONS DESIGN, INC.**

K. PAGE

DEC 23 2019

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$128.75

FILED
2019 DEC 20 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FL

((H19000366547 3)))

((H19000366547 3)))

COVER LETTER

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

SUBJECT: Operations Design, Inc.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
-----------------------	---------

Lawrence E. Crary III, Esq.

Name (printed or typed)

759 SW Federal Highway, Suite 106

Address

Stuart, FL 34994

City, State & Zip

(772) 287-2600

Daytime Telephone Number

lec@crarybuchanan.com

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

(((H19000366547 3)))

CERTIFICATE OF DOMESTICATION

The undersigned, Lawrence D. Shemesh, President,
(Name) (Title)

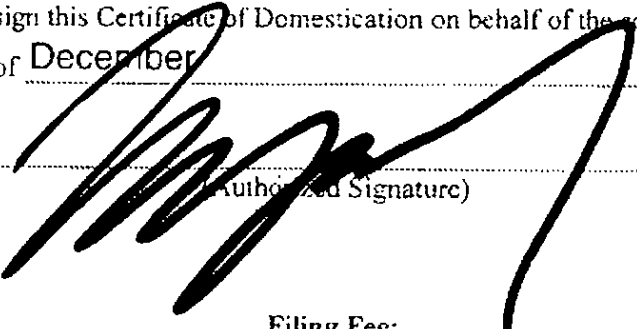
of Operations Design, Inc. (F 19-5587) a foreign corporation,
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was August 12, 2002.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was New Jersey.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Operations Design, Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is Operations Design, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was 54 South Maple Avenue, Marlton, NJ 08053.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President, of Operations Design, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the ____ day of December, 2019.


(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

2019 DEC 20 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

(((H19000366547 3)))

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Operations Design, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address	Mailing Address
555 Colorado Avenue, Suite H	P.O. Box 1007
Stuart, Florida 34994	Palm City, Florida 34991

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

To engage in the business of supply chain consultants;
and to engage in any other lawful act or business.

(((H19000366547 3)))

ARTICLE IV SHARES 10,000
THE NUMBER OF SHARES OF STOCK IS: _____

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS
THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name	Title/Name
Lawrence D. Shemesh P/D/CEO	_____
6447 SW Key Deer Lane	_____
Palm City, Florida 34990	_____

Title/Name	Title/Name
_____	_____
_____	_____
_____	_____

Title/Name	Title/Name
_____	_____
_____	_____
_____	_____

Title/Name	Title/Name
_____	_____
_____	_____
_____	_____

((H19000366547 3)))

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Lawrence E. Crary III, Esq.
759 SW Federal Highway, Suite 106
Stuart, Florida 34994

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Lawrence D. Shemesh
6447 SW Key Deer Lane
Palm City, Florida 34990

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 AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Signature Registered Agent

Date

12/19/2019

Signature Incorporator

Date

12-19-19

FILED

2019 DEC 20 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FL

((H19000366547 3)))