

Division of Corporations

P 2200013565
Florida Department of State
Division of Corporations
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To:

Division of Corporations
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Account Name : HUBCO
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Phone : (516)935-3940
Fax Number : (516)935-3088

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

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FLORIDA PROFIT/NON PROFIT CORPORATION
OMEGA GENERAL MAINTENANCE & SERVICES INC.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: OMEGA GENERAL MAINTENANCE & SERVICES INC.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address
5800 HOUCHIN STREET
NAPLES, FL 34109

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: ANY LEGAL OR LAWFUL PURPOSE**ARTICLE IV SHARES**The number of shares of stock is: 1,500 AT NO PAR VALUE**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JEAN MICHELET LOUIS CHARLES - CEOAddress: 3745 PIAZZA DR, APT 202
FORT MYERS, FL 33916Name and Title: JUDELINE PHILEMONAddress: 3745 PIAZZA DR, APT 202
FORT MYERS, FL 33916

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: JUDELINE PHILEMON

Address: 3745 PIAZZA DR, APT 202

FORT MYERS, FL 33916

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: JEAN MICHELET LOUIS CHARLES

Address: 3745 PIAZZA DR, APT 202

FORT MYERS, FL 33916

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*_____
Required Signature/Registered Agent JUDELINE PHILEMON

FEBRUARY 18, 2022

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 JEAN MICHELET LOUIS CHARLES

FEBRUARY 18, 2022

Date

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TALLAHASSEE, FLORIDA

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