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

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ONII V

•	<u>ONLY</u>				
SUBJECT: OLI	50K 895/	OK 895 ACCOU/9208 NAL INC. de suffix)			
Enclosed is an original for : \$70.00 Filing Fee	and , , , , , , , , , , , , , , , , ,	py ur the articles of \$122.50 Filing Fee & Certified Copy	Incorporation and a check x \$131.25 Filing Fee, Certified Copy		
FROM:	CARLOS E	S. SOZA e (printed or typed)	& Certificate		
2585 NEWMARK DR. Address					
DELTONA FL. 32738. City, State & Zip					
	904 789	2274 e Telephone number	B SB		
	APR 2 4 1995				

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

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be:

OLEOKONSULTING INTERNATIONAL INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2585 NEWMARK DR. DELTONA FL. 32738.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

7 (seven).

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CARLOS E. SOZA 2585 NEWMARK DR. DELTONA FL. 32738.

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of incorporation is(are):

CARLOS E. SOZA 2585 NEWMARK DR. DELTONA FL. 32738.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1 5 HC·S. APRIL C·S.

1995. C·S.

1995. C·S.

Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: OLEUKONSULTING INTERNATION	NAL INC.
2. The name and address of the registered agent and office is:	SE AR
CARLOS E. SOZA	19 PH
(Name)	
2585 NEWMARK DR.	
(P.O. Box <u>not</u> acceptable)	- 1
DELTONA DI 32738 (City/State/Zip)	
(Only) Called	
Having been named as registered agent and to accept service of proce above stated corporation at the place designated in this certificate, I he the appointment as registered agent and agree to act in this capacity. I to comply with the provisions of all statutes relating to the proper and companies of my duties, and I am familiar with and accept the obligations of as registered agent.	ess for the ereby accept further agree complete perfor- f my position
04/15/95 c.5	

(Date)

(Signature)