P95000039684

TRANSMITTAL LETTER

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

700001491677 -05/17/95~-01137--014 ******78.75 *****78.75

SB5/18/55-

SUBJECT: OMEGA MOVINE & INDUSTRIAL ServicES, INC.

(Proposed corporate name - must include suffix)

Enclos for :	sed is an original [] \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	oy of the articles of \$122.50 Filing Fee & Certified Copy	incorporation and a \$131.25 Filing Fee, Certified Copy & Certificate	958/187 17 AM 9:36	SELACTARY OF STATE SIVISION OF CORPORATIONS
	FROM:	Rober	4 Johnson (printed or typed)	N		S S
			LAWN UIE Address ONUILLA FL	<u>37205</u>		
			ity, State & Zip			

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

904-725-7131 Daytime Telephone number

SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

95 HAY 17 AM 9: 36

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:

OMEGA MarinE & INDUSTRIAL SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

4762 LAWN VIEW ST JACKSON VILLY FL

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Robert Johnson 4762 LAWNULLEW ST JACKSonville FL 32205

ARTICLE V INCORPORATOR(S)

	and street address(es) of the incorporator(s) to these Articles of Incorpora
tion is(are):	Robert Johnson 4762 LAWN VIEW STR
	JACKSONVILLY FL
	32705

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF DIVISION OF CORPORATIONS REGISTERED AGENT/REGISTERED OFFICE TALE OF STATE OF CORPORATIONS

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:_	OMEGA MOLINE & INDUSTRIAL
2. The name and address of the reg	
4762 L	(Name) AWN VIEW Str Box not acceptable) L F1 32205

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 hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(City/State/Zip)

(Signature)

28 April 1995

P9500059684

Mr. Robert Johnson
Omega Marine & Industrial Services
4207 Confederate Point Drive
Unit 185
Jacksonville, Florida 32210

August 22, 1995

Division of Corporations Florida Department of State Post Office Box 6327 Tallahassee, Florida 32314

Subject:

Corporate ID P95000039684

Gentlemen:

This is to advise that effective immediately the mailing address for referenced corporation has changed to:

Omega Marine & Industrial Services, Inc. 4207 Confederate Point Drive Unit 185
Jacksonville, Florida 32210

8/24/950

Please change your records accordingly. Thank you.

Very truly yours,

OMEGA MARINE & INDUSTRIAL SERVICES, INC.

Robert G. Johnson

President

RGJ:dii



Division of Corporations Florida Department of State Post Office Box 6327 Tallahassee, Florida 32314

Subject:

Corporate ID P95000039684

Gentlemen:

This is to advise that effective immediately the mailing address for referenced corporation has changed to:

Omega Marine & Industrial Services, Inc. 3285-A Highway 17 Green Cove Springs, Florida 32043

Please change your records accordingly. Thank you.

Very truly yours,

OMEGA MARINE & INDUSTRIAL SERVICES, INC.

Deborah J. Johnson Executive Assistant

/djj