33135-311 CONTACT: RAY **STORMONT** PHONE: (305) 541-3894 FAX: (305) 641-3770 (((H900000C4327))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A. NAME: ALPHA OMEGA ASSOCIATES, INC. FAX AUDIT NUMBER: H90000004327 CURREN CURRENT STATUS: REQUESTED DATE REQUESTED: 03/26/1990 TIME REQUESTED: 12:38:40 CERTIFIED COPIES: 1 CERTIFICATE OF STATUB: 0 NUMBER OF PAGES: 6 METHOD OF DELIVERY: FAX ESTIMATED CHARGE: \$122.50 ACCOUNT NUMBER: 072450003255 Note: Pleaso print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document. (((H98000004327))) \*\* ENTER 'M' FOR MENU, \*\* ENTER SELECTION AND (CR): Help F1 Option Menu F2 NUM CAPS Connect: 00:16:0

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# ARTICLES OF INCORPORATION

OF

## ALPHA OMEGA ASSOCIATES, INC.

who undersigned, SERGIO A. COMRE, JR., acknowledges and files in the Office of the Secretary of State of the State of Florida, for the purpose of forming a corporation for profit, in accordance with the laws of the State of Florida, these Articles of Incorporation, as by law provided.

## NAME AND ADDRESS:

The name of this Corporation shall be:

ALPHA OMEGA ASSOCIATES, INC.

The principal office of the Corporation will has

210 190th Street North Miami Beach, Florida 33160

II

#### BUSINESS!

The general nature of the business and businesses to be transacted are as follows:

To transact any and all lawful business for which corporations may be incorporated under the laws of the State of Florida or the United States.

IRA R. SHAPIRO, RSQUIRE FLORIDA BAR NO. 208943 13899 Biscayne Blvd., 4400 Hismi, FL 33181 (305) 944. 3934

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Without in any way limiting any of the objects and powers of the Corporation, it is expressly declared and provided that the Corporation, to carry on its business, or for the purpose of accomplishing any of the objects hereinabove mentioned shall have the power to make and perform contracts of any kind and description, to do any and all other acts and things, and to exercise any and all other powers, either as principal, agent or broker, conferred by the laws of the State of Florida upon corporations formed under the laws of said State and which now or hereafter may be authorized by law.

III

### SHARESI

The authorized capital stock of this Corporation shall consist of: 1000 shares of common stock, \$1.00 par value.

IV

### EXISTENCE!

The Corporation shall have perpetual existence.

v

# REGISTERED OFFICE AND REGISTERED AGENT:

The initial street address of the Corporation's initial registered office is 13899 Biscayne Boulevard, Suite 400, Mami, Florida 33181. The initial Registered Agent for the Corporation is IRA R. SHAPIRO located at the initial registered office address of the Corporation.

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VI

# DIRECTORS

The Corporation shall have not less than one Director, as provided by the By-Laws. Directors shall hold office for one year, or until their successors have been duly elected and qualified.

VII

### PIRST HOARD!

The following shall constitute the first Board of Directors of the Corporation:

NAME

### ADDRVAS

SERGIO A. GONEZ, JR.

210 190th Street North Miani Beach, FL 33160

#### ADDINA MANA

INCORPURATORA

The name and address of the initial Incorporator of the Corporation is as follows:

VIII

NAME

### ADDRESS

SERGIO A. GOMES, JR.

210 190th Street North Miami Beach, FL 33160

### IX

# GHNHRAL PROVISIONS!

(a) The private property of the Stockholders shell not be subject to the payment of any corporate debts to any extent whatsoever.

- (b) Subject to the provisions and conditions of this Article, the Corporation shall have full power and lawful authority to accept property, labor and services in payment for shares of its Capital stock in lieu of cash, at a just valuation to be fixed by its Board of Directors.
- (c) A Director of the Corporation may transact business, borrow, lend, or otherwise deal or contract with the Corporation to the full extent and subject only to the limitations and provisions of the laws of the State of Florida and the laws of the United States.
- (d) The Corporation shall indemnify each Director and Officer of the Corporation against all or any portion of any expenses reasonably incurred by her in connection with or arising out of any action, suit or proceeding in which he may be involved, by reason of his being or having been an Officer or Director of the Corporation (whether or not he continues to be an Officer or Director at the time of incurring such expanses), to the full extent permitted by and subject only to the limitations and provisions of the laws of the States.

SUBSCRIBED at Minmi, Florida, this 22 day of March, 1996.

BERGER A. COMEZ, JOSE

STATE OF FLORIDA
COUNTY OF FADE

The foregoing instrument was acknowledged, ewern to and subscribed before me by SECID A. COMEZ, JR. this \_\_\_\_\_\_\_ day of March, 1996.

My Commission Replication of the commission of t	Commission/Serial Number (if any)
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Personally Known OR Produced Identification Type of Identification Produced

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CHRITIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE BERVICE OF PROCESS WITHIN THIS STATE, HAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

ALPER GOOGR ASSOCIATES, INC.

In pursuance of Chapter 48.091, Plorida Statutos, the following is submitted, in compliance with said Act:

Pirst -- That ALPHA OMEGA ASSOCIATES, INC. desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, at the City of Miami, County of Dade, State of Florida, has named IRA R. SHAPIRO, located at 13899 Biscayne Boulevard, Suita 400, Miami, Florida, County of Dade, State of Florida, as its agent to accept service of Process within this State.

ACKNOWINDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the abovestated Corporation, at place designated in this Certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

> IRA R BEAPIRO, Registered Agent

> > IIMR 26 PH 5-30 RETANNING STATE AHANNEN FLONDA

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