# P96000047508

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

Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$122.50 \$70.00 478.75 **\$131.25** Filing Fee & Cardiicate Filing Fee & Certified Copy Filing Fee, Certified Copy Filing Fee Certificate **Additional Copy Required** MARK FROM: Name (printed or typed)

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

#### ARTICLES OF INCORPORATION

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.

The name of the corporation shall be:

OLLA TNDUSTRIES, INC.

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

550 South Ocean Blv1., Boxo. Raton FL. 33432

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:

MARK OLLA

### ARTICLE V INCORPORATOR(S) See instructions for officers/directors

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

MARK OLLA 550 South Ocean Blvd., Apt 707 Boca Rom, FL. 33432

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

29th day of May . 1996.

(An additional article must be added if an effective date is requested.)

Signature

Signature

#### Notarization is not required

NOTE: Affixing an o'bicer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: OLLA INDUSTR	LES, INC
2.	The name and address of the registered agent and office is:	
	MARK J. OLLA	
	550 S. Ocean Blvd., Apt. 70	フ ::
	Boco Ration FL. 33432	

Having been named as registered eigent 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.

(SIQUATURE) (DATE) 1936