

P96000050389

TRANSMITTAL LETTER

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

100001845661  
-05/31/96--01032--007  
\*\*\*\*\*70.75 \*\*\*\*\*70.75

SUBJECT: DMH ENTERPRISES, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM:

MILLICENT RICHARDS

Name (printed or typed)

3657 NW 19 ST.

Address

FL. LAUDERDALE, FL. 33311

City, State & Zip

954- 730 3433

Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

96 JUN 11 AM 9 25

FILED

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

W96-11846  
5021611  
SAB  
6/13/96



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

June 5, 1996

MILLICENT RICHARDS  
3657 N.W. 19TH ST.  
FT. LAUDERDALE, FL 33311

SUBJECT: DMR ENTERPRISES, INC.  
Ref. Number: W96000011846

We have received your document for DMR ENTERPRISES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6926.

Sheldon Bream  
Document Specialist

Letter Number: 896A00028003

**ARTICLES OF INCORPORATION**

**FILED**

96 JUN 11 AM 9:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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:

DMA ENTERPRISES INC. of BROWARD.

**ARTICLE II PRINCIPAL OFFICE**

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

3657 NW 19 ST,  
FT. LAUDERDALE, FL. 33311

**ARTICLE III SHARES**

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

ONE (1000) THOUSAND SHARES OF COMMON STOCK HAVING A PAR VALUE  
OF ONE \$1.00. DOLLAR PER SHARE..

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

MILLICENT RICHARDS  
3657 NW 19 ST.,  
FT. LAUDERDALE, FL. 33311

**See instructions for officers/directors**

MILLICENT RICHARDS  
3657 NW 19 ST.  
FT. LAUDERDALE, FL. 33319

MILLICENT RICHARDS  
3657 NW 19 ST. #2  
FT. LAUDERDALE, FL. 33311

DONNOVAN RICHARDS  
3657 NW 19 ST. #2  
FT. LAUDERDALE, FL. 33311.

22nd day of MAY, 19 96

J. M. L. L.  
Signature

**Signature**

**Signature**

**NOTE: Affixing an officer 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: OMR ENTERPRISES INC. of BROWARD.

2. The name and address of the registered agent and office is:

MILLCENT RICHARDS  
(NAME)

3857 NW 19 ST. BAY # 2  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

FT. LAUDERDALE , FL. 33311  
(CITY/STATE/ZIP)

FILED  
96 JUN 11 AM 9:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

*Millicent Richards*  
(SIGNATURE)

5/22/96  
(DATE)