

P96000063652

Requestor's Name

WESLEY SAMPSON
10770 SW 129CT
MIAMI FL 33186

200001898182
-07/18/96--01060--001
13965.00 **122.50

Office Use Only

MBER(S), (if known):

1. _____
(Corporation Name) (Document #)
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(Corporation Name) (Document #)
3. _____
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4. _____
(Corporation Name) (Document #)

☐ Walk in

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☐ Certified Copy

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☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

135 - Corp Name
7/20/96
W96-15253

FILED
95 JUL 29 PM 1:35



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 22, 1996

WESLEY SAMPSON
10770 SW 129TH COURT
MIAMI, FL 33186

SUBJECT: VAR INC.
Ref. Number: W96000015253

We have received your document for VAR INC. and check(s) totaling \$13965.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for microfilming.

I CANNOT READ THE CORPORATE NAME.

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) 487-6878.

Terri Buckley
Corporate Specialist

Letter Number: 696A00035279

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.

ARTICLE I NAME

The name of the corporation shall be: SHARHAT INC.

FILED
05 JUL 29 PM 1:36
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

330 BICAYNE BLVD SUITE 1100
MIAMI, FL 33132

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WEELEY GAMPSON

10770 SW 129CT

MIAMI, FL 33186

ARTICLE V INCORPORATOR(S)

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

WESLEY CAMERON / AMRICK ALEXANDER
10770 SW 129 CT / 12330 SW 151 ST
Miami, FL, 33186 / Miami, FL, 33186

ARTICLE VI DIRECTOR(S)

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

AMRICK ALEXANDER / WESLEY CAMERON
12330 SW 151 ST / 10770 SW 129 CT
Miami, FL, 33186 / Miami, FL, 33186

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

15 day of JULY, 19 96.

Wesley Cameron
Signature

Amrick Alexander
Signature

Signature

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 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: SHARON INC.

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

WESLEY GAMPEON
(NAME)

10770 SW 129 CT
(P.O. BOX NOT ACCEPTABLE)

MIAMI, FL 33186
(CITY/STATE/ZIP)

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.

SIGNATURE Wesley Gampeon

DATE 7/17/96