

TRANSMITTAL LETTER

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

SUBJECT: NOMAD Relocation, Inc.
(Proposed corporate name - must include suffix)

800001958340
-09/27/96--01001--031
****131.25 ****131.25

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:

MRS. Robyn Pier

Name (printed or typed)

5405 WEST PARK Road

Address

Hollywood, Florida 33021

City, State & Zip

(954) 894-2275

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 SEP 24 PM 1:55

FILED

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

*add
HPC*

*3904 4300
HPC*

ARTICLES OF INCORPORATION

FILED
SEP 24 PM 1:55
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:

NOMAD Relocation, INC.

ARTICLE II PRINCIPAL OFFICE

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

NOMAD Relocation
5405 WEST PARK Road
Hollywood, FL 33021

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: MRS. Robyn Pier

5405 WEST PARK Road
Hollywood, FL 33021

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):

Mrs. Robyn Pier
5405 West PARK Road
Hollywood, Florida 33021

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

18th day of September, 1996.

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

Robyn Pier
Signature

Signature

Signature

Notarization is not required

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: NOMAD Relocation, Inc

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

Robyn Pier
(NAME)
5405 WEST PARK Road
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)
Hollywood, Florida 33021
(CITY/STATE/ZIP)

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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.

Robyn Pier
(SIGNATURE)

9-18-96
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314