

P96000082384

TRANSMITTAL LETTER

FILED

96 OCT -4 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: M. D. OGARO INC
(Proposed corporate name - must include suffix)

600001954326
09/24/96--01042--017
*****78.75 *****78.75

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

W96-20333

FROM: MICHAEL D. OGARO
Name (Printed or typed)

4600 N.W. 9th COURT Suite 3
Address

Plantation FL 33317
City, State & Zip

954-797-8930
Daytime Telephone number

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

21
10-7-96



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

September 26, 1996

MICHAEL D. OGARO
4600 N.W. 9TH COURT
SUITE 3
PLANTATION, FL 33317

SUBJECT: M.D. OGARO INC.
Ref. Number: W96000020333

We have received your document for M.D. OGARO 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):

It appears you are trying to file a profit corporation. The forms you have submitted are for a non-profit corporation. Enclosed is blank set of profit articles for your convenience. Select the proper document for your filing and resubmit.

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) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 696A00044272

*Correction
was made.
Thank you*

ARTICLES OF INCORPORATION

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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:

M.D. Ogaro Inc

ARTICLE II PRINCIPAL OFFICE

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

4600 NW 9th ct.
ste #3
Plantation FL 33317

ARTICLE III SHARES

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

ONE Million

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mary Morgan
4600 NW 9th court, ste #3
Plantation FL 33317

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):

Michael D. Qyar 3021 North Oakland Forrest Drive
Apt #201
Oakland Park FL. 33309

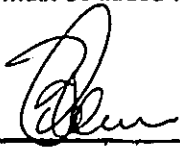
Amy Khealke 3021 North Oakland Forrest Drive
Apt #201
Oakland Park FL. 33309

Mary Morgan 190 NW 78 Terrace
Bldg 4, Apt #106
Pembroke Pines FL

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

17 day of September, 1996.

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



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.

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TALLAHASSEE, FLORIDA

1. The name of the corporation is:

MD. Ogara Inc

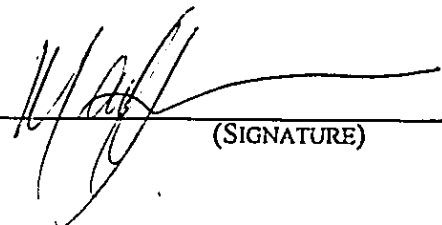
2. The name and address of the registered agent and office is:

4600 NW 9th Ct Ste #3
(NAME)

Plantation FL 33317
(P.O. Box .. Mail Drop Box NOT ACCEPTABLE)

(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)

9/30/96
(DATE)