

**PA 9700268929**

Requester's Name  
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Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. OPTIMUN OF FLORIDA CORP.  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

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- ☒ Walk in   
 ☒ Pick up time 2-00   
 ☒ Certified Copy   
 ☐ Certificate of Status
- ☐ Mail out   
 ☐ Will wait   
 ☐ Photocopy

**FILED**  
 97 AUG -8 PM 1:40  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

NEW FILINGS	
<input checked="" 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

**RECEIVED**  
 97 AUG -8 AM 11:36  
 DEPT. OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

Examiner's Initials

## ARTICLES OF INCORPORATION

FILED  
97 AUG -8 PM 1:14  
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: *OPTIMUM OF FLORIDA Corp.*

### ARTICLE II PRINCIPAL OFFICE

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

*751 E OKEECHOBEE RD  
Hialeah, FL 33010*

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: *1000 shares par value \$1.00 each.*

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*Peter H. Conception  
11960 SW 25th  
MIAMI, FL 33175*

**ARTICLE V INCORPORATOR(S)**

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


Peter M. Concepcion  
11960 SW 25 Terr  
Miami, FL. 33175

**ARTICLE VI DIRECTOR(S)**

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

Peter M. Concepcion  
11960 SW 25 Terr.  
Miami, FL. 33175

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 31 day of July, 1997.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

**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: OPTIMUM OF FLORIDA Corp.
2. The name and address of the registered agent and office is:  
Peter M. Concepcion  
(NAME)  
11960 SW 25 Terr.  
(P.O. BOX NOT ACCEPTABLE)  
Miami, FL. 33175  
(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



DATE

7/31/97

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

97 AUG -8 PM 1:40

FILED

REGISTERED AGENT FILING FEE: \$35.00