

*PG800069388*

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LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

500002611475--6

-08/10/98--01051--008

\*\*\*122.50 \*\*\*122.50

OFFICE USE ONLY

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

1. *M & A OIL COMPANY NO 2*  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time *2.00*

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

RECEIVED  
98 AUG 10 AM 11:18  
DIVISION OF CORPORATION

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

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98 AUG 10 PM 2:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Examiner's Initials

## ARTICLES OF INCORPORATION

M & A Oil Company No

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 & A OIL COMPANY No

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TALLAHASSEE FLORIDA

### ARTICLE II PRINCIPAL OFFICE

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

do 14700 SW 8th St  
MIAMI FL 33196

### ARTICLE III SHARES

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

7500 SHARES COMMON  
\$1.00 PAR VALUE EACH

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

AMIR HOODA  
do 14700 SW 8th St  
MIAMI FL 33196

ARTICLE V INCORPORATOR(S)

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

AMIR HOODA  
14700 SW 88th  
MIAMI FL 33196

ARTICLE VI DIRECTOR(S)

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

AMIR HOODA  
14700 SW 88th  
MIAMI FL 33196

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 7 day of AUGUST, 1998.

A. A. Hooda  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

STATE OF FLORIDA  
COUNTY OF DADE

BEFORE ME, a Notary Public authorized to take acknowledgement in the State and county set forth above, personally appeared, all the above Incorporators known to be and known by me to be the persons who executed the foregoing Articles of Incorporation, and they acknowledged to me that they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County above, this

7<sup>th</sup> day of August, 1998

Kathi M. Pardee  
Notary Public



Kathi M. Pardee  
MY COMMISSION # CC684948 EXPIRES  
October 1, 2001  
BONDED THRU TROY FAIN INSURANCE, INC.

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: M & A OIL COMPANY #2
2. The name and address of the registered agent and office is:  
AMIR HOODA  
(NAME)  
c/o 14700 SW 88th  
(P.O. BOX NOT ACCEPTABLE)  
MIAMI FL 33196  
(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

A. A. Hooda

DATE

August

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TALLAHASSEE FLORIDA  
FILED

REGISTERED AGENT FILING FEE: \$35.00