

TRANSMITTAL LETTER

P98000076762

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

SUBJECT: Emd Enterprises, INC.
(Proposed corporate name - must include suffix)

FILED
98 SEP -4 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
200002631992-19
-09/04/98-01048-013
*****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

ADDITIONAL COPY REQUIRED

FROM: Jose Lecor
Name (Printed or typed)

673 Craig Avenue
Address

SI. NY 10307
City, State & Zip

(718) 967-9574
Daytime Telephone number

RECEIVED
98 SEP -4 AM 10:37
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

7 SEPT 04 1998

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Enid Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1817 Capital Circle NE
Tallahassee, FL 32308

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Nydia Enid Lecour
4004 McLaughlin Drive
Tallahassee, Florida 32308

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Jose Lecour
673 Craig Avenue
Staten Island, New York 10307


Signature/Incorporator

8/12/98
Date

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

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/Registered Agent

8.12.98
Date

FILED
98 SEP -4 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA