

P98000077113
TRANSMITTAL LETTER

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

8/10/98

SUBJECT: NARD ENTERPRISES, INC

400002614964--7
-08/13/98-01064-013
*****70.00 *****70.00

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

FROM:

ORANE DESROSIERS

Name (printed or typed)

3055 BURRIS RD

Address

FORT LAUDERDALE FL 33314

City, State & Zip

954 791 4736

Daytime Telephone number

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

98 SEP - 4 AM 7:47

FILED

9-5-98



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 17, 1998

ORANE DESROSIERS
3055 BURRIS RD.
FT. LAUDERDALE, FL 33314

SUBJECT: ORAN ENTERPRISES, INC.
Ref. Number: W98000018745

We have received your document for ORAN ENTERPRISES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

I called and left my name and telephone number but i never received a return call.,

Please return the original and one copy of 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 (850) 487-6930.

Carolyn Batten
Document Specialist

Letter Number: 498A00042580

ARTICLES OF INCORPORATION

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:

~~ORAN~~ ENTERPRISES, INC
NARO

ARTICLE II PRINCIPAL OFFICE

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

3055 BURRIS RD
FORT LAUDERDALE FL 33314

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: FIVE THOUSAND COMMON SHARES \$ 1.00 P.V.(5,000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ORANE DESROSIERS
3155 BURRIS RD
FORT LADUERDALE FL 33314

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TALLAHASSEE, FLORIDA

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):

ORANE DESROSIERS
3155 BURRIS RD
FORT LAUDERDALE FL 33314

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

10th day of AUGUST 1998, 19

X Orane Desrosiers
Signature
ORANE DESROSIERS

Signature

Signature

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: ORAN ENTERPRISES, INC

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

ORANE DESROSIERS

(NAME)

3155 BURRIS RD

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

FORT LUDERDALE FL 33314

(CITY/STATE/ZIP)

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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.

X Orane Desrosiers
(SIGNATURE)
ORANE DESROSIERS

8-10-98
(DATE)
LOUIS P. GAUTHIER
NOTARY PUBLIC, STATE OF FLORIDA
MY COMMISSION EXP. JANUARY 27, 1999
COMM. NO. CC 427373
Bonded Thru General Ins. Und.
8/10/98

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