# P9900078394 TRANSMITTAL LETTER

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

500002973445--5 -08/30/99--01074--011 \*\*\*\*\*78.S0 \*\*\*\*\*\*78.50

SUBJECT:	Omar Texaco,	Inc.	•	
		ate name - must include suf	ffix)	
Enclosed is an original and	d one (1) conv of th	e articles of incornor	ation and a shoot	· for ·
= norosou lo all'original alla	a one (1) copy of th	e articles of incorpora	auon and a check	CIOF:
X \$78.50		\$122.50		
Filing Fe	e & Certificate		& Certified Copy	/
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			رن در	30 F
FROM:		Ashraf Omar		FILED
		Name	OR	<u>\$</u> &
		505 A V C T	IDA	<b>=</b> =
		595 Ave K S E		
		Street Address		
		Winter Haven	FL 33880	
		City, State & zip		
		(941) 294 - 4824	4	
		Daytime Phone Numb		

COMPONENT SEP 02 1000

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

### 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:

Omar Texaco, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

595 Ave K S E Winter Haven FL 33880

#### **ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstandind at any one time is (1000) one thousand shares of one dollar (\$1.00) par value common stock, which shall be designated " COMMON STOCK ".

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Ashraf Omar 595 Ave K S E Winter Haven FL 33880

#### ARTICLE V INCORPORATOR(S)

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

Ashraf Omar 595 Ave K S E Winter Haven FL 33880 President

a incorporator(	s) nas (nave) e	xecuted these Atticles of incorporation
day of	August	1999
Ashf	Signat	ure
	Signat	ure
	Signat	nure _
		day of August  Signat

Signature

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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 :	Omar Texaco, Inc.	
2.	The name and address of the registered a	agent and office is :	
		99 TALI	
	Ashraf Omar	ALL AUG.	
	(Name)	FILET MASSEE, MASSEE,	
	595 Ave K S E		
	(P.O.BOX "not" ac	ccepted) Q Q	
	Winter Haven FL	33880	
	(City/State/Zip	p)	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the 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.

Asignature Augus

Signature Date

August 05, 1999