

PG000101237

OFFICE USE ONLY (Document #)

(Requestor's Name)

(Address)

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

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

1. EUREKA Holdings, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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

FILED
99 NOV 18 PM 1:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NEW FILINGS	
<input 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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*****78.75 *****78.75

Examiner's Initials

ARTICLES OF INCORPORATION
OF
EUREKA HOLDINGS, INC.

FILED
99 NOV 18 PM 1:00
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 this corporation shall be: EUREKA HOLDINGS, INC.

ARTICLE II
PRINCIPAL OFFICE

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

P.O. BOX 44-2089
MIAMI, FL. 33144

ARTICLE III
CAPITAL STOCK

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

100 shares at \$1.00 par value

ARTICLE IV
SHARES OF STOCK

RAMON MESA	50% shares of stock
MANUEL MESA	50% shares of stock

ARTICLE V
OFFICERS OF CORPORATION

President	RAMON MESA
Vice- President	MANUEL MESA
Secretary	MANUEL MESA
Treasurer	RAMON MESA
Director	RAMON MESA
Director	MANUEL MESA

ARTICLE VI
REGISTERED AGENT AND ADDRESS

The name and address of the initial Registered Agent is:

RAMON MESA
2541 S.W. 99 Court
MIAMI, FL. 33165

ARTICLE VII
INCORPORATOR(S)

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

RAMON MESA
2541 S.W. 99 Ct
MIAMI, FL. 33165

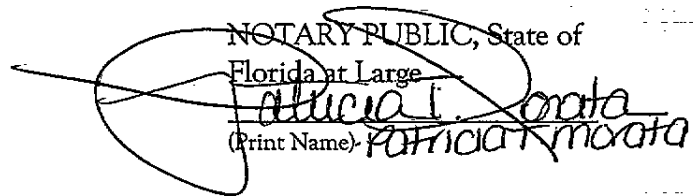
The undersigned has (have) executed these Articles of Incorporation this 17th day of
November, 1999.


RAMON MESA

STATE OF FLORIDA
COUNTY OF DADE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State
aforesaid and in the Court aforesaid, to take acknowledgments, personally appeared RAMON
MESA, to me known to be the person(s) described in and who executed the foregoing instrument
or have produced drivers License - m2001316020230 as identification and
who did take an oath and acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid the 17th day of
November, 1999.


NOTARY PUBLIC, State of
Florida at Large
Patricia I. Morata
(Print Name) Patricia I. Morata
My Commission Expires:
11-9-2001

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

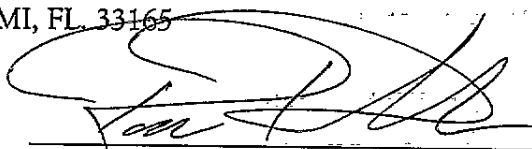
Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating registered office/registered agent in the State of Florida.

1. The name of the corporation is:

EUREKA HOLDINGS, INC.

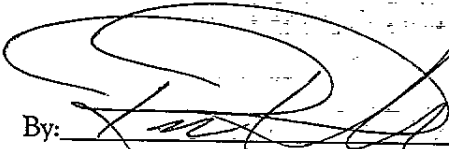
2. The name and address of the Registered Agent and office is:

RAMON MESA
2541 SW 99 Ct
MIAMI, FL 33165


RAMON MESA
Registered Agent

Date: 11/17/99

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.


By: RAMON MESA
Registered Agent

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TALLAHASSEE FLORIDA