

OFFICE USE ONLY (Document #)

*600002943826-8*

HAZARUS 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

600002943826-8  
-07/28/99-01043-021  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. O.A.D. PROPERTIES, INC.  
(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 Statute

FILED  
99 JUL 28 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

RECEIVED  
99 JUL 28 AM 11:14  
TALLAHASSEE FLORIDA

Examiner's Initials

ARTICLES OF INCORPORATION

OF

O.A.D. PROPERTIES, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

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JUL 28 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: O.A.D. PROPERTIES, INC.

The principal place of business of this corporation shall be: 481 N.W. 188 Terrace.  
PEMBROKE PINES, FLORIDA 33029

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:  
SIXTY SHARES OF TEN DOLLARS PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):  
ORESTES A. DELGADO 481 N.W. 188 TERRACE. PEMBROKE PINES, FLA. 33029  
PRES/SEC/TREASURER/DIRECTOR.

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

ORESTES A. DELGADO 481 N.W. 188 TERRACE. PEMBROKE PINES, FLA. 33029  
PRES/SEC/TREA/DIRECTOR.

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these  
Articles of Incorporation this 25 day of JUNE, 1999

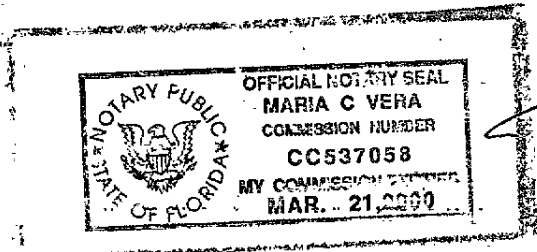
Orestes A. Delgado

PRESIDENT

O. A. D. PROPERTIES, INC.

STATE OF FLORIDA  
COUNTY OF DADE

THE FOREGOING Instrument was acknowledged and sworn to before me this 25 th  
day of JUNE, 1999 by ORESTES A. DELGADO  
(Name of incorporator)  
of O. A. D. PROPERTIES, INC.  
(Name of Corporation)



Notary Public

[Signature]  
My Commission Expires: \_\_\_\_\_

**CERTIFICATE DESIGNATING  
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 the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: O. A. D. PROPERTIES, INC.

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

ORESTES A. DELGADO, 481 N.W. 188 TERRACE, PEMBROKE PINES, FLA 33029

(P. O. BOX NOT ACCEPTABLE)

(CITY/STATE/ZIP)

SIGNATURE *Orestes A. Delgado*  
(Corporate Officer)

TITLE PRESIDENT

DATE 25 JUNE 1999

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.

SIGNATURE *Orestes A. Delgado*  
(Registered Agent)

DATE 25 JUNE 1999

**FILED**  
99 JUL 28 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA