

**PRODD09256**

OFFICE USE ONLY (Location #)  
 LAZARUS 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

OFFICE USE ONLY

**FILED**  
 00 JAN 27 PM 2:10  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

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

1. ACCUSTAT 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 Status

**RECEIVED**  
 00 JAN 27 AM 11:21  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 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

800003112848-3  
 -01/27/00-01062-011  
 \*\*\*\*\*78.75 \*\*\*\*\*78.75

Examiner's Initials

**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.*

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TALLAHASSEE FLORIDA

**ARTICLE I NAME**

**The name of the corporation shall be:**

X Accustat Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

PMB#222, 15751 Sheridan Street  
Fort Lauderdale, FL 33331

**ARTICLE III SHARES**

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

100

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

**The name and address of the initial registered agent is:**

Alicia Mendez  
16574 N.W. 7 Street  
Pembroke Pines, FL 33028

**ARTICLE V INCORPORATOR(S)**

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

<u>Clifford Knight</u>	<u>608 N.W. 20th Ct</u>	<u>Pompano Beach Fla 33060</u>
<u>Alicia Mendez</u>	<u>16574 N.W. 7 St</u>	<u>Pembroke Pines, Fl 33028</u>
<u>Maria P. Gonzalez</u>	<u>1236 Sevilla Avenue</u>	<u>Coral Gables, Fl 33134</u>

**ARTICLE VI DIRECTOR(S)**

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

<u>Clifford Knight</u>	<u>608 N.W. 20th Ct</u>	<u>Pompano Beach Fla 33060</u>
<u>Alicia Mendez</u>	<u>16574 N.W. 7 St</u>	<u>Pembroke Pines, Fl 33028</u>
<u>Maria P. Gonzalez</u>	<u>1236 Sevilla Avenue</u>	<u>Coral Gables, Fl 33134</u>

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this JAN day of 22.

Clifford Knight  
Signature

Alicia Mendez  
Signature

Maria P. Gonzalez  
Signature

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TALLAHASSEE FLORIDA

FILED

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT 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 RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Alicia Mendez  
REGISTERED AGENT