

LABARUS CORPORATE INDUSTRIES, INC.

Requestor's Name

800 S. ... AVENUE, SUITE: 167

Address

MIAMI, FLORIDA 33174 (305)552-5973

City/State/Zip Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

P97000 10/19/97

Office Use Only

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

1. H & H FURNITURE REPAIR CORPORATION  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_ 800002361858-2  
(Corporation Name) (Document #) -12/03/97-01029-042  
\*\*\*122.50 \*\*\*122.50

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in
- Mail out
- Pick up time 2.00
- Will wait
- Certified Copy
- Certificate of Status
- Photocopy

FILED  
97 DEC -3 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
97 DEC -3 AM 11:16  
DIVISION OF CORPORATION

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

Handwritten signature and initials: 12/3

**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.*

97 DEC -3 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**ARTICLE I NAME**

The name of the corporation shall be: H & H Furniture Repair Corporation

**ARTICLE II PRINCIPAL OFFICE**

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

4401 S.W. 75 Ave. Bay # 9  
Miami, Fla. 33155

**ARTICLE III SHARES**

The number of share of stock that this corporation is authorized to have outstanding at any one time is: ONE THOUSAND (1000) SHARES OF CAPITAL STOCK.

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

The name and address of the initial registered agent is:

Hernando Chilito, 10220 S.W. 121 St., Miami, Florida, 33176

**ARTICLE V INCORPORATOR(S)**

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

Hernando Chilito, 10220 S.W. 121 St., Miami, Florida, 33176  
Gerardo E. Guerrero, 8850 Fountainbleau Boulevard Apt. 403, Miami, Fla. 33172

**ARTICLE VI DIRECTOR(S)**

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

Hernando Chilito, 10220 S.W. 121 St., Miami, Florida, 33176  
Gerardo E. Guerrero, 8850 Fountainbleau Boulevard Apt. 403, Miami, Fla. 33172

The undersigned incorporator(s) has (have) executed these Articles of Incorporation This:      Twenty nine                      day of      November, 1997.



\_\_\_\_\_  
Signature



\_\_\_\_\_  
Signature

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/ REGISTERED OFFICE**

Pursuant to the provisions of sections 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:

**H & H FURNITURE REPAIR CORPORATION**

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

\_\_\_\_\_ Hernando Chilito, 10220 S.W. 121 St

\_\_\_\_\_  
(NAME)

\_\_\_\_\_  
(P.O.BOX NOT ACCEPTABLE)

Miami, FL 33176

\_\_\_\_\_  
(CITY/STATE/ZIP)

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.

SIGNATURE \_\_\_\_\_

*Chilito*

DATE: November 29, 1997

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
1997 DEC -3 PM 3:05  
FILED