

OFFICE USE ONLY (Document #)

LAVARUS 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

400002496374--2

-04/22/98--01037-024

\*\*\*\*122.50 \*\*\*\*122.50

OFFICE USE ONLY

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

1. COLMEX INTERNATIONAL, INC. (Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 9:00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

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

FILED  
98 APR 22 PM 1:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4/22  
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.*

### ARTICLE I NAME

The name of the corporation shall be:

COLMEX INTERNATIONAL, INC.

FILED  
98 APR 22 PM 1:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

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

7545 NW 70TH STREET  
MIAMI, FL 33166

### ARTICLE III SHARES

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

150

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RAFAEL F. AMOR  
7850 NW 146TH STREET # 420  
MIAMI LAKES, FL 33016

ARTICLE V INCORPORATOR(S)

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

ALVARO FIGUEROA  
10254 NW 59TH TERR.  
MIAMI, FL 33178

HENRY DIAZ  
945 JADE CT.  
WESTON, FL 33326

RAFAEL F. AMOR  
7850 NW 146TH ST. # 420  
MIAMI LAKES, FL 33016

ARTICLE VI DIRECTOR(S)

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

President

ALVARO FIGUEROA  
10254 NW 59TH TERR.  
MIAMI, FL 33178

Vice President

Henry Diaz

945 Jade Ct

Weston, FL 33326

Treasurer

Rafael F. Amor

7850 NW 146th St #420

Miami Lakes, FL 33016

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this APRIL day of 17TH, 1998.

  
\_\_\_\_\_

Signature

  
\_\_\_\_\_

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: COLMEX INTERNATIONAL
2. The name and address of the registered agent and office is:  
RAFAEL F. AMOR  
(NAME)  
7850 NW 146TH STREET # 420  
(P.O. BOX NOT ACCEPTABLE)  
MIAMI LAKES, FL. 33016  
(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 [Signature]DATE 4-17-98

FILED  
98 APR 22 PM 1:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REGISTERED AGENT FILING FEE: \$35.00