

OFFICE USE ONLY (Document #)

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

700002664467--7

-10/15/98--01049--016

*****78.75 *****78.75

OFFICE USE ONLY

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

1. AYUDA MIENTRAS TE AYUDAS "AMA", inc
(Corporation Name) (Document #)
2. ~~Associate Club Collection Point + Body Shop, Inc.~~
(Corporation Name) (Document #)
3. Help While You are getting help. Inc.
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00

☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input checked="" 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

Medicine +
Providing Medical Need
to the exterior

Examiner's Initials

ARTICLES OF INCORPORATION

OF

The undersigned, acting as incorporator(s) of a Corporation pursuant to Chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation for such corporation:

ARTICLE I

The name of the corporation shall be: AYUDA MIENTRAS TE AYUDAS "AMA", INC

The principal place of business of this corporation shall be:

5535 West 14 Lane, Hialeah, Florida 33012

ARTICLE II

The period of the duration of this corporation is perpetually
unless dissolved according to law.

ARTICLE III

The purpose (purposes) for which the corporation is organized is (are):

Purpose of organization is to provide medicine and medical needs to the exterior.

ARTICLE IV

The qualifications for members and the manner of their admission are:

The election of board of directors shall be stated in the by-laws.

ARTICLE V

The number constituting the initial Board of directors trustees or managers of the corporation is Three (3) (Circle One), and the names and addresses of the persons who are to serve initial are:
(NOT LESS THAN 3)

NAME

FRANCISCO ROBAINA, PRESIDENT
S/S #267-60-4786
JORGE VARGAS, VICE-PRESIDENT
S/S #264-81-7251
ANDREA ROBAINA, SECRETARY

ADDRESS

5535 West 14 Lane, Hialeah Fla. 33012
483 East 19 St., Hialeah Fla. 33013
5535 West 14 Lane, Hialeah Fla. 33012

FILED
98 OCT 15 PM 3:21
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VI

This corporation is organized under a non-stock basis.

ARTICLE VII

In the event of dissolution, the residual assets of the organization will be turned over to one or more organizations which themselves are exempt as organizations described in Sections 501(c)(3) and 170(c)(2) of the Internal Revenue Code of 1954 or corresponding sections of any prior or future law, or to the Federal, State, or Local Government for exclusive public purpose.

ARTICLE VIII

The name and address of each incorporator is

FRANCISCO ROBAINA, PRESIDENT	5535 West 14 Lane, Hialeah, Florida 33012
JORGE VARGAS, VICE-PRESIDENT	483 East 19th Street, Hialeah, Florida 33013
ANDREA ROBAINA, SECRETARY	5535 West 14 Lane, Hialeah, Florida 33012

IN WITNESS WHEREOF, the undersigned incorporator(s) has have executed these Articles of Incorporation this 12th day of OCTOBER, 19 98.

Signature(s) of Incorporator(s)

Francisco Robaina
FRANCISCO ROBAINA, PRESIDENT

Jorge Vargas
JORGE VARGAS, VICE-PRESIDENT

Andrea Robaina
ANDREA ROBAINA, SECRETARY

STATE OF FLORIDA

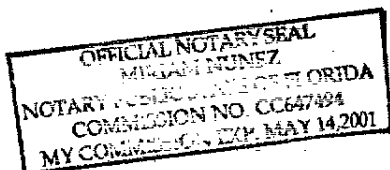
COUNTY OF MIAMI-DADE

THE FOREGOING instrument was acknowledged and sworn to before me this 12th day of OCTOBER, 19 98, by FRANCISCO ROBAINA
(Name of Incorporator)

of AYUDA MIENTRAS TE AYUDAS "AMA"

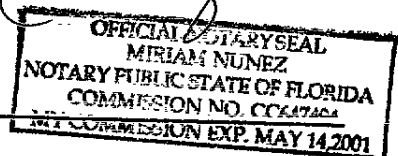
(Name of Corporation)

(SEAL)



Miriam Nunez
Notary Public

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: _____

AYUDA MIENTRAS TE AYUDAS "AMA", INC

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

FRANCISCO ROBAINA

5535 West 14 Lane
Hialeah Florida 33012

(P. O. BOX NOT ACCEPTABLE)

(CITY/STATE/ZIP)

SIGNATURE x _____

(Corporate Officer)

FRANCISCO ROBAINA

TITLE President

DATE October 12, 1998.

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 x _____

(Registered Agent)

FRANCISCO ROBAINA

DATE OCTOBER 12, 1998.

FILED
OCT 15 PM 3:21
TALLAHASSEE
FLORIDA
SECRETARY OF STATE