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LAZARUS CORPORATE FILING SERVICE, INC.

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LOCAL REPRESENTATIVE TALLAHASSEE

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OFFICE USE ONLY

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

1. EVERYTHING & KIDS 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

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  
99 AUG 10 PM 2:08  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Examiner's Initials

**ARTICLES OF INCORPORATION**

**FOR**

Everything 4 Kidz Inc.

FILED  
99 AUG 10 PM 2:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I NAME**

The name of the corporation shall be:

Everything 4 Kidz Inc.

**ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS**

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

Le Jeune Bank Centre  
782 N.W. Le Jeune RD # 339  
Miami, Fla 33126

**ARTICLE III PURPOSE(S)**

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

To help underprivileged children with  
clothing, food, medical + financial  
assistance. Also assist in the investigations  
of missing children.

**ARTICLE IV MANNER OF ELECTION OF DIRECTORS**

The manner in which the directors are elected or appointed is as follows:

By minutes & bylaws

## ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited as follows:

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

*MURA BOUTISTA*  
782 N.W. Le Jeune RD # 339  
Miami, Fla 33124

## ARTICLE VII INCORPORATORS

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

*MURA BOUTISTA* 782 N.W. Le Jeune RD # 339  
*URY MARTINEZ* 782 N.W. Le Jeune RD # 339  
*ESTHER BOUTISTA* 782 N.W. Le Jeune RD # 339

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this  
9 day of August, 19 99.

Signature(s) of the Incorporator(s)

*Mura Boutista*

*MURA BOUTISTA*  
Typed name of incorporator signing

\_\_\_\_\_

*URY MARTINEZ*  
Typed name of incorporator signing

\_\_\_\_\_

*ESTHER BOUTISTA*  
Typed name of incorporator signing

**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:

*Everything 4 Kidz Inc*

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

*MILKA BALTISTA*  
*782 N.W. LeJeune RD #339*  
*Miami, FL 33126*

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 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.



DATE: Aug 9, 1999

**FILED**  
99 AUG 10 PM 2:09  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA