

OPTIONAL FORM NO. 100 (Rev. 1-78)

# LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

FILED  
00 MAY -9 PM 12:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
00 MAY -9 AM 10:21  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

1. AUDIA SERVICES 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/<br>QUALIFICATION      |                     |
|-------------------------------------|---------------------|
| <input checked="" type="checkbox"/> | Foreign             |
| <input checked="" type="checkbox"/> | Limited Partnership |
| <input checked="" type="checkbox"/> | Reinstatement       |
| <input checked="" type="checkbox"/> | Trademark           |
| <input type="checkbox"/>            | Other               |

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-05/09/00--01031--022  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Examiner's Initials

**ARTICLES OF INCORPORATION**

FILED  
00 MAY - 9 PM 12:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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:

*Audia Services Inc.*

**ARTICLE II PRINCIPAL OFFICE**

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

*4461 Palm Ave, Suite B.  
Hialeah - FL 33014.*

**ARTICLE III SHARES**

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

ONE HUNDRED SHARES (100) WITH FIVE DOLLARS (\$5.00) VALUE PER SHARE

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

The name and address of the initial registered agent is:

*Alexandrina Audia  
4461 Palm Ave. Suite B.  
Hialeah - FL 33014*

ARTICLE V INCORPORATOR(S)

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

Alexandria Curia - President  
Walfrido Curia - Vice-President  
4461 Palm Ave - Suite B  
Pinebrook - FL 33014

The undersigned has(have) executed these Articles of Incorporation this

06 day of May, 2000

(+) Alexandria Curia, President  
Signature/Title

Walfrido Curia, Vice-President  
Signature/Title

\_\_\_\_\_  
Signature/Title

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

Pursuant to the provisions of section 607.0501, 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: Audia Services Inc.

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

Alexandria Audia  
(NAME)  
4461 Palm Ave. Suite 100  
(P.O. BOX NOT ACCEPTABLE)  
Miramar - FL 33011  
(CITY/STATE/ZIP)

00 MAY -9 PM 12:11  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

SIGNATURE Alexandria Audia  
(corporate officer)  
TITLE President  
DATE 5/6/00

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 Alexandria Audia  
DATE 5/6/00