

**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)

400003428374--3

-10/18/00--01038--005

\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. OPTICAL DEPOT CORP.

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)



Walk in



Pick up time

2:00



Certified Copy



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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

RECEIVED  
00 OCT 18 AM 10:25  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

00 OCT 18 PM 12:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

**OPTICAL DEPOT CORP.**

## ARTICLE II- PRINCIPAL OFFICE

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

**11344 Quail Roost Drive  
Miami, Florida 33157**

## ARTICLE III- SHARES

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

**100 Shares having and individual par value of \$1.00**

## ARTICLE IV- INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Paul Magnum  
12841 S.W. 47<sup>th</sup> Terrace  
Miami, Florida 33157**

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TALLAHASSEE FLORIDA

**ARTICLE V- INCORPORATOR(S)**

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

**Paul Magnum                      12541 S.W. 47<sup>th</sup> Terrace  
Miami, Florida 33175**

**ARTICLE VI- DIRECTOR(S)**

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

**Paul Magnum                      President, & Secretary  
100%-Percent of Shares  
12841 S.W. 47<sup>th</sup> Terrace  
Miami, Florida 33175**

**The undersigned incorporator(s) has (have) executed these Articles of Incorporation this: 12<sup>h</sup> day of October 2000**

  
\_\_\_\_\_  
Signature

Article of Incorporation  
Filing Fee- \$35

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

*Pursuant to the provisions of sections 607.0501 or 617.050, 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:

**OPTICAL DEPOT CORP.**

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

**PAUL MAGNUM**  
**11344 QUAIL ROOST DRIVE**  
**MIAMI, FL. 33157**

**HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN 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 A REGISTERED AGENT.**

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

Registered Agent Filing Fee- \$35

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