

PO1000030573

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)

900003909109--6

-03/26/01--01075--002

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

OFFICE USE ONLY

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

1. TUNDISI ENTERPRISES, 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 |

RECEIVED
01 MAR 26 AM 10:56
DIVISION OF CORPORATION

FILED
01 MAR 26 PM 1:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Examiner's Initials

Articles of Incorporation

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE 1 - NAME

The name of the corporation shall be:

TUNDISI ENTERPRISES, INC.

ARTICLE 2 - PRINCIPAL OFFICE

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

**2750 NE 183 STREET No. 1612
Aventura, FL 33160-2121**

ARTICLE 3 - SHARES

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

One hundred (100) shares; \$1.00 par value.

Article 4 - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Berta M. Sanders
9550 NW 77 Ave. Suite 3
Hialeah Gardens, FL 33016**

FILED
01 MAR 26 PM 1:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE 5 - INCORPORATORS

The names and street address of the incorporator to these Articles of Incorporation are:

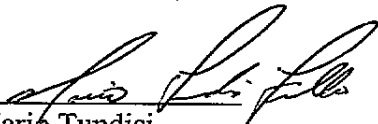
Mario Tundisi
2750 NE 183 Street No. 1612
Aventura, Florida 33160-2121

ARTICLE 6 - DIRECTOR

The name and street address of the director to these Articles of Incorporation is:

Mario Tundisi
2750 NE 183 Street No.1612
Aventura, Florida 33160

The undersigned incorporators have executed these Articles of Incorporation this 12th
Day of February 2001


Mario Tundisi

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

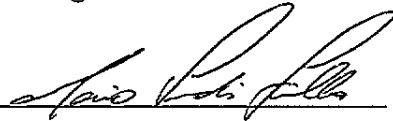
Pursuant to the provision of sections 607.0501 or 617.0501, Florida statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designation the registered office/registered agent, in the State of Florida.

1. The name of the Corporation is: TUNDISI ENTERPRISES, INC.
2. The name and address of the registered agent and office is:

**Berta M Sanders
9550 NW 77 Ave. Suite 3
Hialeah Gardens, Fl. 33016**

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 _____



DATE _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA