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## Florida Department of State

Division of Corporations Public Access System

Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)922-4001

From:

Account Name

: FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

Phone : (305)599-0839

Fax Number

: (305)716-0346

# FLORIDA PROFIT CORPORATION OR P.A.

L&K MANAGEMENT, INC. Lissett Martinez Management, Inc.

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Certificate of Status	0
Certified Copy	1
Page Count	03 (5)
Estimated Charge	\$78.75

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# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 29, 2001

FAS-T

SUBJECT: L & K MANAGEMENT, INC.

REF: W01000007116

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

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Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is F39022.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Plorida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

LISSETT MARTINEZ MANAGEMENT, INC.

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OI APR -2 PH 2: 34
SECRETARY OF STATE
TALLAHASSLE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

8226 NW 192 TERRACE MIAMI , FLORIDA 33015

The mailing address of this corporation shall be:

8226 NW 192 TERRACE MIAMI. FLORIDA 33015

#### ARTICLE III SHARES

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

ONI: HUNDRED SHARES ONE DOLLAR PAR VALUE

Prepared by: Pedro M. Ramos, CPA 594 East 9 Street #A Hialeah, FL 33010 (305)885-9415 ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LISSETT MARTINEZ 8226 NW 192 TERRACE MIAMI . FLORIDA 33015

ARTICLE V INCORPORATOR (S) See instructions for officers / directors

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

#### LISSETT MARTINEZ

#### 8226 NW 192 TERRACE

#### MIAMI, FL 33015

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this <u>28 TR</u> day of MARCH

Signature

Signature

Signature

Notarization is not required NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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# CERTIFICATE OF DESIGNATION OF 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:

LISSETT MARTINEZ MANAGEMENT, INC.

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

#### LISSETT MARTINEZ

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(P.O. Box or Mail Drop NOT acceptable)	38,8 7,8	Ś	1
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MIAMI. PL 33015	: <u>-</u> . \c	$\ddot{\omega}$	U
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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) \* MARCH 28 , 2001

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314