

**P01000039/90**

OFFICE USE ONLY (Form #)

**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)**

**300004015473--1**

**-04/18/01--01051--013**

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

OFFICE USE ONLY

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

1. EVENTS GROUP INTERNATIONAL, 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

RECEIVED  
01 APR 18 AM 10:56  
DIVISION OF CORPORATION  
TALLAHASSEE FLORIDA

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

Examined's Initials

**ARTICLES OF INCORPORATION**  
**OF**  
**EVENTS GROUP INTERNATIONAL, INC.**

**ARTICLE I**

**NAME**

The name of the Corporation is Events Group International, Inc.

**ARTICLE II**

**TERM OF CORPORATE EXISTENCE**

The Corporation shall exist perpetually unless dissolved according to law and such existence shall commence at the time of the filing of these Articles of Incorporation by the Department of State. The principal place of business of this corporation is:  
13850 SW 100<sup>th</sup> Ave., Miami, FL 33176.

**ARTICLE III**

**PERMITTED ACTIVITY**

The Corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

**ARTICLE IV**

**AUTHORIZED SHARES**

The aggregate number of shares, which the Corporation shall have authority to issue, will be One Hundred (100) shares of voting common stock with \$1.00 par value.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## **ARTICLE V**

### **PREEMPTIVE RIGHTS DENIED**

No holder of any shares of the Corporation shall have any preemptive right to purchase, subscribe for or otherwise acquire any shares of the Corporation of any class now or hereafter authorized, or any securities, exchangeable for or convertible into such shares, or any warrants or any instruments evidencing rights or options to subscribe for, purchase, or otherwise acquire such shares.

## **ARTICLE VI**

### **REGISTERED OFFICE AND AGENT**

The initial registered office of the Corporation and initial place of business is 13850 SW 100<sup>th</sup> Ave., Miami, FL 33176. The initial Registered Agent is Lizet Cortes, 13850 SW 100<sup>th</sup> Ave., Miami, FL 33176.

## **ARTICLE VII**

### **DIRECTORS**

The business of the Corporation shall be managed by a Board of Directors consisting of not fewer than one person, the exact number to be determined from time to time in accordance with the By-Laws.

The name and address of the directors of the Board of Directors who shall serve until the first annual meeting of shareholders or until his successor is elected and qualified shall be:

#### NAMES

Lizet Cortes, Director  
President & Secretary

#### ADDRESSES

13850 SW 100<sup>th</sup> Ave.  
Miami, FL 33176

**ARTICLE VIII**  
**INCORPORATOR**

The name and address of the incorporator is: 13850 SW 100<sup>th</sup> Ave., Miami, FL 33176.

**ARTICLE IX**  
**INDEMNIFICATION**

Every person now or hereafter serving as director, officer or employee of the Corporation shall be indemnified and held harmless by the Corporation from and against any and all loss, cost, liability and expense that may be imposed upon or incurred by him in connection with or resulting from any claim, action, suit or proceeding, in which he may become involved, as a party of otherwise, by reason of his being or having been a director, officer or employee of the Corporation, whether or not he continues to be such at the time such loss, cost, liability or expense shall have been imposed or incurred, except with regard to matters as to which any such director, officer or employee shall be adjudged in any claim, action, suit or proceeding to be liable for his own gross negligence or willful misconduct in the performance of duty.

Expenses (including attorneys' fees) incurred in defending any claim action, suit or proceeding may be paid by the Corporation in advance of the final disposition of such a proceeding.

IN WITNESS WHEREOF, I have signed these Articles of Incorporation this 17<sup>th</sup> of April, 2001.

  
\_\_\_\_\_  
Lizet Cortes

**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: Events Group International, Inc.
2. The name and address of the Registered agent and office is: Lizet Cortes, 13850 SW 100<sup>th</sup> Ave., Miami, FL 33176.

Signature: \_\_\_\_\_

  
Lizet Cortes

Title: Registered Agent

Date: April 17, 2001.

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 agreed 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: \_\_\_\_\_

  
Lizet Cortes

Date: April 17, 2001

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA