

OFFICE USE ONLY (Mailing Label)

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

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

1. DUPE USA, INC.

(Corporation Name)

(Document #)

2. _____

(Corporation Name)

(Document #)

3. _____

(Corporation Name)

(Document #)

4. _____

(Corporation Name)

(Document #)

900004485959--4

-07/19/01--01033--032

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

☒ 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

Examiner's Initials

FILED
01 JUL 19 PM 12:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

01 JUL 19 PM 12:35

FD-302

PM 12:35

SECRETARY OF STATE
FLORIDA

PM 12:35

FD-36

PM 12:35

FD-36

PM 12:35

FD-36

PM 12:35

FD-36

PM 12:35

ARTICLE VII

THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY.
THE NUMBER OF DIRECTORS SHALL BE FIXED BY LAW AND MAY BE CHANGED FROM
TIME TO TIME.

ARTICLE VIII

THE NAME AND STREET ADDRESSES OF THE INITIAL DIRECTOR OF THIS CORPORATION IS
ANDRE LUIZ PEDROSA 17111 NW 13 STREET PEMBROKE PINES, FL 33028

THE AFORSAID DIRECTORS SHALL HOLD OFFICE FOR THE YEAR OF THIS CORPORATION
EXISTANCE OR UNTIL A SUCCESSOR IS CHOSEN AS PROVIDED FOR IN THE BYLAWS.

THE INITIAL OFFICERS OF THIS CORPORATION AND THEIR ADDRESSES ARE :

PRESIDENT ANDRE LUIZ PEDROSA 17111 NW 13 STREET PEMBROKE PINES, FL 33028
VICE-PRESIDENT : CARLOS GONCALVEZ ~~17111 NW 13 STREET~~ ^{168 AVENUE} PEMBROKE PINES, FL 33028
SECRETARY ; ANDRE LUIZ PEDROSA 17111 NW 13 STREET PEMBROKE PINES, FL 33028
TREASURER : CARLOS GONCALVEZ 1336 NW 168 AVENUE PEMBROKE PINES, FL 33028

ARTICLE IX

THE NAME AND STREET ADDRESS OF THE INCORPORATOR

ANDRE LUIZ PEDROSA 17111 NW 13 STREET PEMBROKE PINES, FL 33028

THE UNDERSIGNED HAS EXECUTED THESE ARTICLES OF INCORPORATION

1


SIGNATURE / TITLE

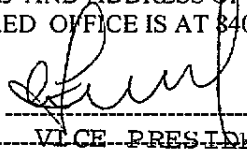
CARLOS GONCALVEZ / VICE PRESIDENT

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

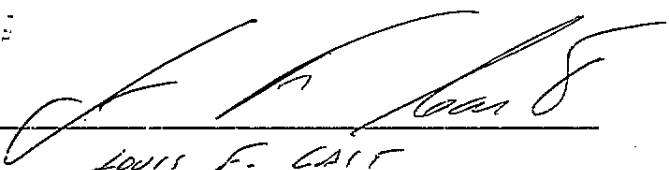
FLORIDA,SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/ REGISTERED AGENT, IN THE STATE OF FLORIDA

1. THE NAME OF THE CORPORATION IS: DUPE USA, INC
2. 31336 NW 168 AVENUE PEMBROKE PINES, FLORIDA 33028
4. THE NAME AND ADDRESS OF THE REGISTERED AGENT IS LOUIS F. CAST AND THE
REGISTERED OFFICE IS AT 8405 NW 53 STREET SUITE C-100 MIAMI,FLORIDA 33166

SIGNATURE 
TITLE : ~~VICE PRESIDENT~~
DATE 07/10/01

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.

XXXXXXXXXX
XXXXXXXXXX


LOUIS F. CAST
7/10/01

FILED
01 JUL 19 PM 12:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA