

OFFICE USE ONLY Document #

# P61600081776

## 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)

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-08/20/01--01071--025

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

OFFICE USE ONLY

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

1. AMINS ENTERPRISES, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☒ Pick up time

☐ Certified Copy

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☐ Will wait

☐ Photocopy

☐ Certificate of Status

01 AUG 20 PM 12:16  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

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



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

August 17, 2001

LAZARUS

MIAMI, FL

SUBJECT: AMINS ENTERPRISES, INC.  
Ref. Number: W01000019091

We have received your document for AMINS ENTERPRISES, INC.. However, the document has not been filed and is being returned for the following:

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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole  
Corporate Specialist  
New Filings Section

Letter Number: 801A00047157

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SUFFICIENCY OF FILING

2001 AUG 20 AM 10:39

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**ARTICLES OF INCORPORATION**

**OF**

**AMIN ENTERPRISES GROUP, INC.**

FILED  
01 AUG 20 PM 12:16  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned, desiring to form a corporation under the laws of the State of Florida, by and under the provisions of the statutes of the State of Florida, providing for the formation, liabilities, rights and privileges and immunities of corporations for profit, certifies that:

**ARTICLE I - NAME**

The name of this corporation is: Amin Enterprises Group, INC.

**ARTICLE II - EXISTENCE**

This corporation shall have perpetual existence.

**ARTICLE III - PURPOSE**

This corporation is organized for the purpose of transacting any or all lawful business permitted under the laws of the United States and of this State.

**ARTICLE IV - CAPITAL STOCK**

This corporation is authorized to issue one hundred (100) shares of common stock, each having a par value of no par, which shall be designated as common shares.

**ARTICLE V - ADDRESS**

The street address and mailing address of the registered office of this Corporation is:

2000 SOUTH DIXIE HIGHWAY, SUITE 100-M, MIAMI, FLORIDA 33133  
and the name of the initial registered agent of this corporation at that address is:

MICHEL HUYSMAN, ATTORNEY AT LAW

who hereby is familiar with and accepts the duties and responsibilities as registered agent for said corporation.

**ARTICLE VI - DIRECTORS**

This corporation shall have one director initially. The number of directors may either increase or diminish from time to time in accordance with the by-laws but shall never be fewer than one (1). The name and address of the initial director of this corporation is:

AMIN HASNANI

The principal corporate office is at:

6848 UNIVERSITY DRIVE, TAMARAC, FLORIDA 33321.

**ARTICLE VII - SUBSCRIBERS**

The name and address of the Incorporator signing these Articles of Incorporation is:

AMIN HASNANI, 3406 NW 109 WAY, CORAL SPRINGS, FLORIDA 33065.

**ARTICLE VIII - ALIENATION OF SHARES**

No shareholder of the Corporation may sell or transfer his shares to another without first offering them to the other shareholders of the Corporation, and he must offer them at the same price.

**ARTICLE IX - BY-LAWS**

The power to adopt, alter, amend or repeal by-laws of this Corporation shall be vested in the Board of Directors and Shareholders.

**ARTICLE X - DIRECTORS' COMPENSATION**

The Shareholders of this Corporation shall have the exclusive authority to fix the compensation of the Directors of the Corporation.

**ARTICLE XI - AMENDMENT OF ARTICLES**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation,

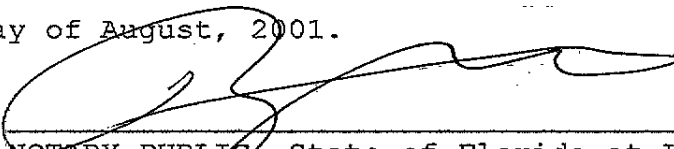
  
INCORPORATOR

STATE OF FLORIDA )  
 )  
COUNTY OF MIAMI-DADE)

SS:

BEFORE ME, the undersigned authority, personally appeared AMIN HASNANI, to me well known and known to me to be the individual described herein and who executed the foregoing Articles of Incorporation, and acknowledged before me that he executed the same for the purposes therein expressed.

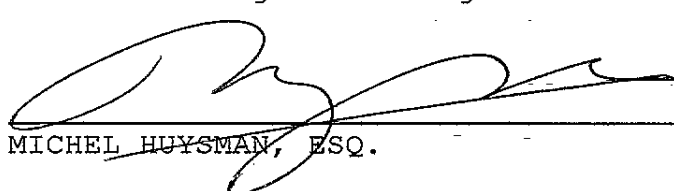
WITNESS, my hand and official seal in the County and State named above, this 14th day of August, 2001.

  
\_\_\_\_\_  
NOTARY PUBLIC, State of Florida at Large  
My Commission Expires:

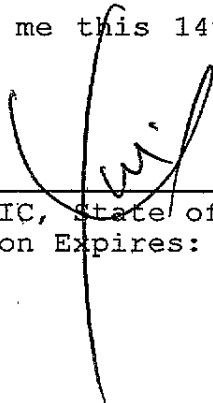


Michel Huysman  
MY COMMISSION # DD010119 EXPIRES  
May 2, 2005  
BONDED THRU TROY FAIN INSURANCE, INC.

THE UNDERSIGNED hereby notifies that he has accepted the position and agrees to act as Registered Agent for Amin Enterprises Group, INC.

  
\_\_\_\_\_  
MICHEL HUYSMAN, ESQ.

SWORN TO and subscribed before me this 14th day of August, 2001.

  
\_\_\_\_\_  
NOTARY PUBLIC, State of Florida at Large  
My Commission Expires:

