NOV-18-02 MON 11:58 AM LAZARUS CORPORATION

FAX:3052201440

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SECRETALIZATION FLORIDA

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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: 12000000019
Phone: (305)552-5973
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FLORIDA PROFIT CORPORATION OR P.A.

ELITE PARTY SUPPLIES, INC.

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

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LAZARUS CORPORATION

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ARTICLES OF INCORPORATION OF

ELITE PARTY SUPPLIES, INC.

OZ NOV 18 AM 7:06

SECRETALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

ELITE PARTY SUPPLIES, INC.

ARTICLE II PRINCIPAL OFFICE

11739 SW 99 LAND, MIAMI, FLORIDA 33186

ARTICLE III PURPOSE (\$)

The specific purpose (s) for which the corporation is organized is (see):

A CORPORATION TO DO BUSINESS SALES & RENTING PARTIES SUPPLIES

THE CORPORATION WILL HAVE A 100 SHARES FOR \$5.00 VALUE EACH

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is: By the people that conform the Corporation

ARTICLE VINITIAL REGISTRED AGENT AND STREET ADDRESS

The name and Florida Street address of the initial registered agent is:

MARIANO GONZALEZ

11739 SW 99 LANE MIAMI, FL 33186

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

MARIANO GONZALEZ 11739 SW 99 LANE

MIAMI, FL 33186

100 SHARES

PRESIDENT

Signature President / Incorporator

11/18/202

LAZARUS CORPORATION

FAX: 3052201440

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OZ NOV 18 AM 7: 07
ALLAHASSEE, FLORIDA

Having been named as registered agent and to accept services 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.

STATE OF FLORIDA

5.5.

COUNTY MIAMI DADE

BEFORE ME, an officer duly authorized in the state aforesaid in the county aforesaid to take acknowledgments, personally appeared MARIANO GONZALEZ to me known to be person described in and who executed the same for the purposes therein they expressed.

WITNESS my hand and official seal in the County and State last aforesaid in this 18 day of November of 2002

> DOMESTIZ SEE STANKED YOUR SHIDING BYHON

NOTARY PUBLIC STATE OF FLORIDA AT LARGE