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LAZARUS CORPORATE FILING	G SERVICE		
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1. LS DISTRIBUT	ING COR	S) (if known):	
(Corporation Name)		Occument #)	
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. (Corporation Name)	(0	Pocument #)	
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OTHER FILINGS	REGISTRATION/ QUALIFICATION		
Annual Report	Foreign	<u>z.:-</u>	
Fictitious Name —	Limited Partnership		
Name Reservation	Reinstatement	_	
	Trademark	_	
-			·
•	Other	Examiner's Initials	

ARTICLES OF INCORPORATION

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

ARTICLE I - NĀME

The name of the corporation shall be: LS DISTRIBUTING CORP.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

5605 N.W. 109TH AVENUE # 31

MIAHI, FL 33179

ARTICLE III -SHARES

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

42

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

FRANCISCO SOTO GANDARA
5605 N.W. 109TH AVENUE #\$!
HIAHI, FL 331 \$8

FILED

<u> ARTICLE V – INCORPORATOR</u>

The name and street address of the incorporator to these Articles of Incorporation is:

EUGENIO L LARA 5605 NW LOGTH AVENUE #71 MINHI, FL 33178

The undersigned incorporator has executed these Articles of Incorporation this 28 day of 2003

\\$ignature

ARTICLE VI- DIRECTOR(S)

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

EUGENIO L LARA

5605 NW 109TH AVENUE # \$1

HIAHI, FL 33178

POES/DELT

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SECRETARY OF STATE
TALLAHASSEF, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

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