

P04000056188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

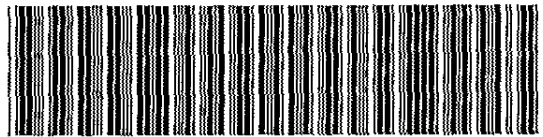
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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04 APR -1 AM 10:59  
REGISTRATION  
DIVISION  
TALLAHASSEE  
FLORIDA

OFFICE USE ONLY(DOCUMENT #)

**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

OFFICE USE ONLY

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

1. BIG FACE 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

| 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/<br>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

## **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 1- NAME**

The name of the corporation shall be: **Big Face Inc.**

### **ARTICLE 2- PRINCIPAL OFFICE**

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

**1111 West 37<sup>th</sup> St.  
Hialeah, FL. 33012**

### **ARTICLE 3- SHARES**

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

**100**

### **ARTICLES 4- INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

**Erick Tejada  
1111 West 37<sup>th</sup> St.  
Hialeah, FL. 33012**

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**ARTICLE 5- INCORPORATOR**

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

**Erick Tejada  
1111 West 37<sup>th</sup> St.  
Hialeah, FL. 33012**

The undersigned incorporator has executed these Articles of Incorporation this 31 day of March 2004



Signature

**ARTICLE 6- DIRECTOR(S)**

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

**Erick Tejada (P)  
1111 West 37<sup>th</sup> St.  
Hialeah, FL. 33012**

**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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