

# PD4000065085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

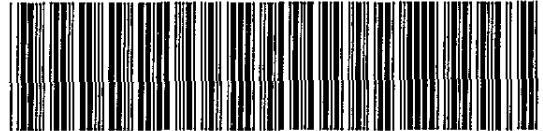
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only

3 D. WHITE APR 20 2004



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04/19/04--01029--023 \*\*78.75

RECEIVED  
04 APR 19 AM 11:08  
DIVISION OF CLERICAL  
TALLAHASSEE, FLORIDA  
2004 APR 19 P 2:46  
SECRETARY OF STATE  
FILED

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. LAISA REMODELIN 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

FILED

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.

2004 APR 19 P 2:46

ARTICLE I-NAME

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The name of the corporation shall be:

LAISA REMODELING INC.

ARTICLE II-PRINCIPAL OFFICE

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

1820 JAMES AVENUE-2B  
MIAMI BEACH, FL 33139-7924

ARTICLE III-SHARES

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

1000 common shares \$1.00 par value

ARTICLE IV-INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

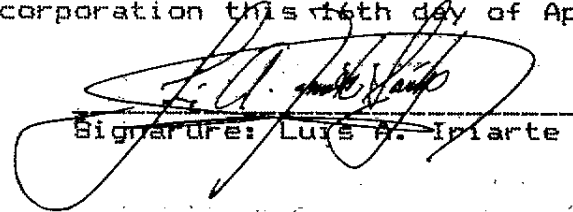
FELIX M. VALIDO  
1820 JAMES AVENUE-APT 2B  
MIAMI BEACH, FL 33139-7924

ARTICLE V- INCORPORATOR(S)

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

LUIS A. IRIARTE SANCHEZ  
3140 SW 26TH STREET  
MIAMI, FL 33133

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 16th day of April 2004

  
Signature: Luis A. Iriarte

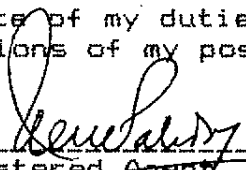
ARTICLE VI-DIRECTOR(S)

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

LUIS A. IRIARTE SANCHEZ  
3140 SW 26TH STREET  
MIAMI, FL 33133

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFIC

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated 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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA