

P05000018434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

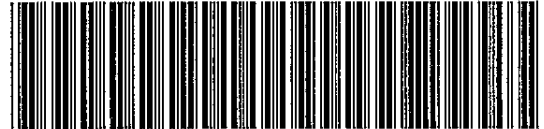
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



700045692847

02/04/05--01003--003 \*\*70.00

RECEIVED  
05 FEB -3 PM 3:40  
DATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE

FILED  
05 FEB -3 PM 12:43  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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. TAPICERIA NICARO AND SERVICE 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  
OF  
TAPICERIA NICARD AND SERVICE INC.  
-----

ARTICLE I

THE NAME OF THE CORPORATION IS:  
TAPICERIA NICARD AND SERVICES INC.  
-----

ARTICLE II

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE III

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THE CORPORATION IS AUTHORIZES TO ISSUES IS 500 SHARES AT \$1.00 PER VALUE.

ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH THE CORPORATION WILL BEGIN BUSINESS IS THE SUM OF \$500.00

ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMENCE UPON FILING.

ARTICLE VI

THE STREET ADDRESS IS THE PRINCIPAL OFFICE OF THE CORPORATION IN THIS STATE SHALL BE:

2262 NW 33 ST MIAMI FLORIDA, 33142

ARTICLE VII

THE NAME(S) AND STREET ADDRESS(ES) OF THE PERSON SIGNING THESE ARTICLES ARE:

DENIS OSORNO  
2262 NW 33 ST. MIAMI FLORIDA, 33142  
MARGARITA OSORNO  
2262 NW 33 ST. MIAMI FLORIDA, 33142

ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN TWO OR MORE THAN SIX DIRECTORS. THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF TWO DIRECTORS WHOSE NAME AND ADDRESS ARE AS FOLLOWS:

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 FEB -3 PM 12:44

DENIS OSORNO  
2262 NW 33 ST. MIAMI FLORIDA, 33142  
MARGARITA OSORNO  
2262 NW 33 ST. MIAMI FLORIDA, 33142

ARTICLE IX

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE, AND  
THE NAME OF THE INITIAL REGISTERED AGENT AT THAT ADDRESS  
SHALL BE:

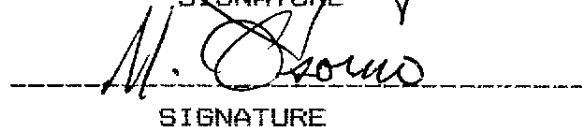
DENIS OSORNO  
2262 NW 33 ST. MIAMIA FLORIDA, 33142

THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF  
INCORPORATION THIS TWO DAYS OF FEBRUARY OF 2005.

DENIS OSORNO

  
SIGNATURE

MARGARITA OSORNO

  
SIGNATURE

CERTIFICATE OF DESIGNATION  
-----  
REGISTERED AGENT/REGISTERED OFFICE  
-----

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized -- under the laws of the State of Florida, submits the following statement in designating the registered office/registered --- agent, in the State of Florida.

1. The name of the corporation is: TAPICERIA NICARD AND  
SERVICES INC. \_\_\_\_\_

2. The name and address of the registered agent and office is  
DENIS OSORNO  
\_\_\_\_\_

NAME  
2262 NW 33 ST.  
\_\_\_\_\_

MIAMI FLORIDA, 33142  
\_\_\_\_\_

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE 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.

SIGNATURE \_\_\_\_\_

DATE: FEBRUARY 2, 2005

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 FEB -3 PM 12:44