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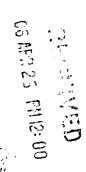
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# **LAZARUS** CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCUMEN	IT NUMBER(S), (if known):
1. BLUE LAXES SUPP	LIES, CORP.
(Corporation Name)	(Document #)
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Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials

CR2E031(7/97)

# 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 - NAME

The name of the corporation shall be:

BLUE LAKES SUPPLIES, CORP.

#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:  $8040 \, \text{NW} \, 155 \, \text{ST} \, # 216$ 

MIAMI LAKES, FL 33016

# **ARTICLE III -SHARES**

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

100

# ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ROSALINA VALDES 16230 NW 84 PL MIAMI LAKES PL 33016. OF APR 26 PH D: 13

# **ARTICLE V - INCORPORATOR**

The name and street address of the incorporator to these Articles of

Incorporation is:	ROSALINA VALDES.			
	16230 NW 84PL			
	MIAMI LAKES PL) 380	06 APR 26		
The undersigned	incorporator has executed these Articles	of R		
Incorporation this	11/09/	6 PH 12: 1		
	∫	<b>新</b>		
	ARTICLE VI- DIRECTOR (S)			
The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):				
Ro	SALINA VALDES TRI	ESIDENT		
16 17	230 NW 84PL 1AMI LAKES PL 330	5/6		

## 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