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# LAZARUS CORPORATE FILING SERVICE

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CR2E031(7/97)

MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Pick up time Certificate of Status Mail out Will wait Photocopy **AMENDMENTS** NEW FILINGS Rrofit Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Domestication Dissolution/Withdrawal Other Merger REGISTRATION/QUALIFICATION OTHER FILINGS Foreign Annual Report Limited Partnership Fictitious Name 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 - NAME

The name of the corporation shall be:

## ARTICLE II - PRINCIPAL OFFICE

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

#### **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:

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SECRETARY OF STATE

#### ARTICLE V - INCORPORATOR

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

MAXIMO SARRACINO 1876 SW 11 ST MIAMI, FL 33135

The undersigned incorporator has executed these Articles of Incorporation this 26day of 700 2 200 6

ARTICLE VI DIRECTOR(S)

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

MAXIMO SARRACINO President 1876 SW 11 ST MIAMI, FL 33185

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