

P08000016009

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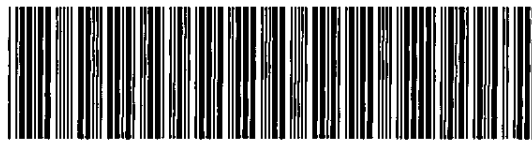
(Business Entity Name)

(Document Number)

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RECEIVED  
08 FEB -8 AM 10:52  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
08 FEB 12 PM 1:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VH

# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165

305-552-5973

Office Use Only

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

1. A.S.D.A. CAPITAL MANAGEMENT, 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

- ☒ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

### OTHER FILINGS

- ☐ Annual Report  
☐ Fictitious Name

### AMENDMENTS

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

### REGISTRATION/QUALIFICATION

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 11, 2008

LAZARUS

SUBJECT: A.S.D.A. CAPITAL MANAGEMENT, INC.  
Ref. Number: W08000007124

We have received your document for A.S.D.A. CAPITAL MANAGEMENT, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and street address must be consistent wherever it appears in your document.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 608A00008810

# ARTICLES OF INCORPORATION OF

**A.S.D.A. Capital Management, Inc.**

FILED  
08 FEB 12 PM 1:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*The undersigned, acting as Incorporator of a Corporation under the Florida Business Corporation Act., adopts the following Articles of Incorporation.*

## ARTICLES I NAME

*The Name of this Corporation is: A.S.D.A. Capital Management, Group, Inc.*

## ARTICLE II DURATION

*This Corporation shall have perpetual existence commencing on the date of the filing these Articles with the Department of State.*

540 Brickell Key Dr. # 523  
Miami, Florida 33131

### ARTICLE III

Initial registered agent and street address the name address of  
the initial registered agent is : *MARTHA J. BENITO* :

*701 SW 27TH AVENUE SUITE 606  
MIAMI, FLORIDA 33135* :

### **ARTICLE IV CAPITAL STOCK**

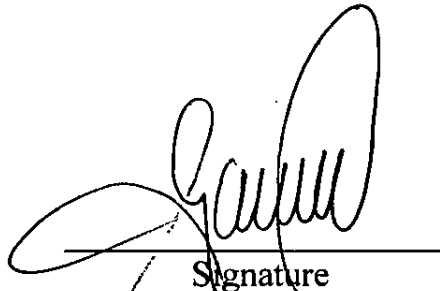
*The maximum number of shares of stock that this Corporation is  
authorized to have outstanding at any one time is : 1000  
       Shares of common stock , having a par value of : \$ 1.00*

### ARTICLE V ADDRESS

The address of the principal office of this Corporation is :

540 Brickell Key Dr. # 523  
Miami , Florida 33133

The undersigned incorporator has executed these Articles of Incorporation this 06 day of February 2008

A handwritten signature in black ink, appearing to read 'Gonzalo F. Machado', is written over a horizontal line.

Signature  
Gonzalo F. Machado  
540 Brickell Key Dr. # 523  
Miami , Florida 33133

## ***ARTICLE VI*** ***DIRECTOR ( S )***

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

***President : Gonzalo F. Machado***


**ARTICLE VII  
REGISTERED AGENT**

**FILED**  
08 FEB 12 PM 1:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

***CERTIFICATE OF DESIGNATION OF REGISTERED***

***AGENT OFFICE : Martha J. Benito***

***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***  
***Martha J. Benito***  
***701 SW 27<sup>th</sup> Avenue Suite 606***  
***Miami , Florida 33135***