

PO8900222583

(Requestor's Name)

(Address)

(Address)

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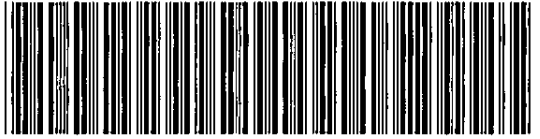
(Business Entity Name)

(Document Number)

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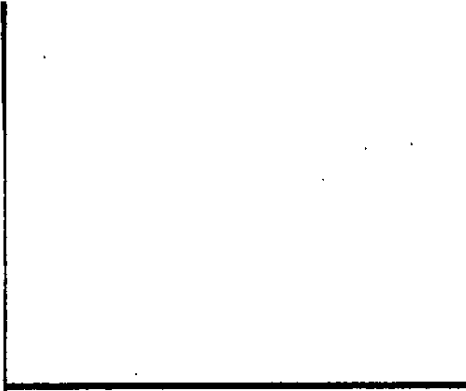
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2008

**LAZARUS**  
**CORPORATE FILING SERVICE**  
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**MIAMI, FL 33165**  
**305-552-5973**



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

1. LIZGAB ENTERPRISES 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

**AMENDMENTS**

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

**OTHER FILINGS**

- Annual Report  
 Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign  
 Limited Partnership  
 Reinstatement  
 Trademark  
 Other

Examiner's Initials

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ARTICLES OF INCORPORATION  
OF

LIZGAB ENTERPRISES INC

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) Competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I  
CORPORATION NAME

The corporation's name shall be: LIZGAB ENTERPRISES INC

ARTICLE II  
DURATION

The corporation shall exist perpetually unless dissolved according to Florida Laws.

ARTICLE III  
PURPOSE

The corporation is organized for the purpose of engaging in any activity of business Permitted under the laws of the United States and the State of Florida.

ARTICLE IV  
CAPITAL STOCK

The corporation is authorized to issue one hundred (100) shares of five dollars (\$ 5.00) par value Common Stock, which shall be designated as "Common Shares".

ARTICLE V  
PLACE OF BUSINESS

The principal place of business of said corporation shall be:

15730 SW 232 Street  
Goulds FL

**ARTICLE VI**  
**NUMBER OF DIRECTORS**

The number of Directors of this corporation, shall be no less than one (1) nor more than fifteen (15).

**ARTICLE VII**  
**BOARD OF DIRECTORS**

The name and addresses of the first Board of Directors of this Corporation who shall hold office initially, are as follows:

NAME Bertha Iglesias  
ADDRESS 5001 SW 68 Avenue  
CITY Miami STATE FL ZC 33155

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZC \_\_\_\_\_

**ARTICLE VIII**  
**INCORPORATORS**

The name and addresses of the incorporators signing these Articles of Incorporation, are as follows:

NAME Bertha Iglesias TITLE President  
ADDRESS 5001 SW 68 Avenue  
CITY Miami STATE FL ZC 33155

NAME \_\_\_\_\_ TITLE \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZC \_\_\_\_\_

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation, this 28 day of February of 2008

Bertha Iglesias (Seal)

\_\_\_\_\_ (Seal)

STATE OF FLORIDA        )  
  )  
COUNTY OF DADE        )        SS

Before me, a Notary Public authorized to take acknowledgement in the State and County set for above, personally appeared:

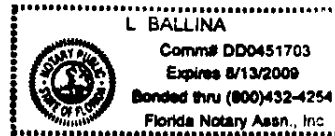
  Bartha Iglesias  

Known to me and known to be the person (s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that she executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and county aforesaid, this 28 day of February of 2008.

*L Ballina*

Notary Public  
State of Florida at Large



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TALLAHASSEE, FLORIDA

CERTIFICATE OF REGISTERED AGENT

OF

LIZGAB ENTERPRISES INC

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

FIRST: That LIZGAB ENTERPRISES INC desiring to organize under the laws of the State of Florida with its principal office as indicated in the articles of incorporation at the City of Goulds, County of Dade State of FL, has named:

Mr/Ms Bartha Iglesias  
Located at 5001 SW 68 Avenue  
City of Miami County of Dade  
State of FL

At its Agent to accept service of process within this State.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position. I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

  
Registered Agent