

# Florida Department of State Division of Corporations

Public Access System

#### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000151230 3)))



H090001512303ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from the page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I20000000019
Phone: (305)552-5973
Fax Number: (305)220-1440

## FLORIDA PROFIT/NON PROFIT CORPORATION

#### **ELOLAM CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

U 6/26/09

Corporate Filing Menu

Help

6/25/2009 1:32 PM

## H09000151230

#### 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:

ELOLAM CORP



#### ARTICLE II - PRINCIPAL OFFICE

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

#### <u>ARTICLE III – SHARES</u>

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

100.

## <u>ARTICLES IV – INITIAL REGISTERED AGENT AND STREET</u> <u>ADDRESS</u>

The name and address of the initial registered agent is:

H09000151230

### H09000151230

#### ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

6301 COLLINS AVE. APT 2908 Minni Beach - FL (33141 OSVALDO HOCSMAN

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES
OF INCORPORATION THIS

DAY OF JUNE 200°

SIGNATURE

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

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

OSVALDO HOCSHAN - PRESIDENT:

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED

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