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PICK-UP	WAIT	MAIL		
(Business Entity Name)				
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Special Instructions to F	iling Officer			
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DIVISION OF STATE ON THE PROPERTY OF STATE O

SECRETARY OF STATE





LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

	Office Use Only	
RPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):	
LORZ FAMILY, JA	>-	
(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
Walk in Pick up time	2.00 Certified	Copy
Mail out Will wait	Photocopy Certificat	. • •
EW FILINGS	<u>AMENDMENTS</u>	
Profit	Amendment	
Not for Profit	Resignation of R.A., Officer/Dire	ector
Limited Liability Domestication	Change of Registered Agent Dissolution/Withdrawal	
Other	Merger	
HER FILINGS	REGISTRATION/QUALIFICATION	<u>ON</u> .
Annual Report	☐ Foreign	
Fictitious Name	Limited Partnership	
	Reinstatement	
	Trademark Other	
E031(7/97)	Examiner'	's Initials
(1211)126		



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 17, 2010

LAZARUS

SUBJECT: LOPEZ FAMILY, INC. Ref. Number: W10000023936

We have received your document for LOPEZ FAMILY, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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: 210A00012325



ARTICLES OF INCORPORATION

OF

10 MAY 19 AM 9:41

LOPEZ FAMILY OF EIGHT, INC SECRETARY OF STATE TALLAHASSEE FLORIDA

The undersigned, for the purpose of forming a corporation for profit under Florid

The undersigned, for the purpose of forming a corporation for profit under Florida law adopt the following articles of incorporation:

ARTICLE ONE: NAME

The name of the corporation is LOPEZ FAMILY OF EIGHT, INC.

ARTICLE TWO: DURATION

This corporation shall exist perpetually.

ARTICLE THREE: PURPOSE

The general purpose for which this corporation is being formed is to include transactions of any or all lawful business permitted under the laws of the State of Florida.

ARTICLE FOUR: CAPITAL STOCK

This corporation is authorized to issue eight hundred (800) shares of common stock of a par value of \$1.00 per share.

ARTICLE FIVE: PREEMPTIVE RIGHTS GRANTED

Each shareholder of any class of stock of this corporation shall be entitled to full preemptive rights to purchase any unissued or treasury shares of the corporation and any securities of the corporation convertible into or carrying a right to subscribe to or acquire any unissued or treasury shares.

ARTICLE SIX: REGISTERED AND PRINCIPAL OFFICE

The street address of the initial and principal registered office of the corporation is 1200 S.W. 62nd Avenue, West Miami, Florida 33144 and the name of the initial registered agent at that address is ANDRES LOPEZ.

ARTICLE SEVEN: DIRECTORS

This corporation shall have one director initially. The number shall be fixed by the by-laws and may be changed from time to time. The name and address of the initial director of the board is:

NAME

ADDRESS

ANDRES LOPEZ

1200 S.W. 62nd Avenue West Miami, Florida 33144

He shall hold office until the first annual meeting of stockholders.

APPHOVED AND FILED

ARTICLE EIGHT: INCORPORATORS

10 MAY 19 AM 9: 41

WALTER A. ANON

MY COMMISSION # DD 776197 EXPIRES: August 5, 2012 Bonded Thru Notary Public Underwriters

The name and stree	t address of the inco	rporator is:	SECRETARY OF STAT TALLAHASSEE, FLORII
NAME		ADDRESS	THE PROPERTY OF THE PARTY OF TH
ANDRES LOPEZ		1200 S.W. 62 nd Avenue West Miami, Florida 33144	
IN WITNESS WHI	EREOF, I have subse	cribed my name this <u>/</u>	day of
and Lan			
ANDRES LOPEZ			
STATE OF FLORIDA)) SS:		
COUNTY OF DADE)		
On this day in the State of Florida, pers person whose name is substacknowledges that he has e	cribed to in the fores	going Articles of Incorpo	oration, and
IN WITNESS WHE above written.	EREOF, I hereunto s	et my hand and official s	seal the date first

ACCEPTANCE OF REGISTERED AGENT

Name:

I, the undersigned, hereby accept the appointment as Registered Agent of the above noted corporation. I am familiar with, and accept the obligations of, Section 607.325 of the Florida Statutes.

ANDRES LOPEZ REGISTERED AGENT

Notary Public STATE OF FI

My Commission expires: