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LAZARUS

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
SECURE OUTSOURCING SERVICES CORP

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

Electronic Filing Menu

Corporate Filing Menu

Help

J. SIMMONS FEB 22 2011

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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:

Secure Outsourcing Services Corp

ARTICLE II - PRINCIPAL OFFICE

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

4661 SW 155 Place
Miami Florida 33185

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:

MARIA Lucila Vaughan
4661 SW 155 Place
Miami Florida 33185

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 FEB 21 AM 10:00

FILED

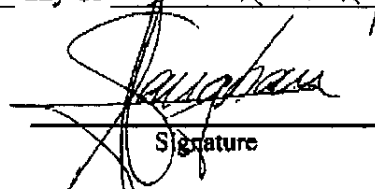
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ARTICLE V - INCORPORATOR

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

MARIA LUCILA VAUGHAN
4661 SW 155 PLACE
MIAMI FLORIDA 33185

The undersigned incorporator has executed these Articles of Incorporation this

18 day of FEBRUARY 2011.
Signature**ARTICLE VI- DIRECTOR (S)**

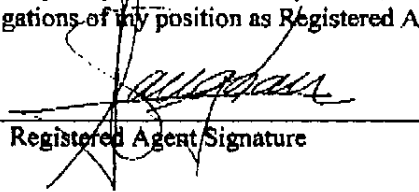
The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

MARIA LUCILA VAUGHAN (P)
4661 SW 155 PLACE
MIAMI FL 331852011 FEB 21 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

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