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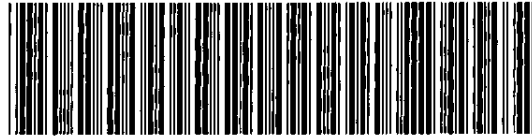
(Business Entity Name)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

2/3/12

# 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. IVALDI DESIGNS & INSTALLATION,  
(Corporation Name) (Document #)

2. INC  
(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

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Examiner's Initials

**ARTICLES OF INCORPORATION  
IVALI DESIGNS & INSTALLATION, INC**

Page 1  
**FILED**  
**12 FEB -2 AM 7:50**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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 IVALI DESIGNS & INSTALLATION, INC

**ARTICLE II: PURPOSE**

The corporation shall engage in any activity or business permitted under the Laws of the State of Florida and of the United States of America.

**ARTICLE III: PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be  
8362 PINES BOULEVARD #203 PEMBROKE PINES FL 33024  
Street address City State Zip Code

**ARTICLE IV: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to issue and have outstanding at one time is 500 shares of common stock, and which common stock shall have non par value.

All stock is to be issued as fully paid and exempt from assessment.

**ARTICLE V: DURATION**

The existence of the corporation is perpetual.

**ARTICLE VI: INITIAL REGISTERED AGENT AND STREET ADDRESS.**

The name of the initial registered agent is: LINCOLN MARTINEZ and the street address is 8362 PINES BOULEVARD #203, PEMBROKE PINES, FL 33024

**ARTICLE VII: INITIAL OFFICER(S) /DIRECTOR(S).**

The name and street address of the member(s) of the first Board of Directors and slate of Corporate officer(s) are as follows:

Name	Title	Address
LINCOLN MARTINEZ	P/T/D	8550 NW 4 <sup>TH</sup> ST, PEMBROKE PINES, FL 33024
IVAN R NUNEZ	VP/S/D	9771 W HEATHER LN, MIRAMAR, FL 33025


**ARTICLE VIII: SECTION 1244**


The stock of the corporation may be issued pursuant to the provisions under Section 1244 of the Internal Revenue Code in order for the stockholders of the corporation may receive the benefits thereunder.

**ARTICLE IX: INCORPORATOR(S)**

The name(s) and street address of the incorporator(s) to theses Articles of Incorporation is (are) LINCOLN MARTINEZ and IVAN R NUNEZ. The undersigned incorporators has executed these Articles of Incorporation this:

\_\_\_\_\_ day, JANUARY 2012

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**REGISTERED AGENT/REGISTERED OFFICE.**

**PURSUANT TO THE PROVISIONS OF SECTION 607.050, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.**

- 1. The name of the corporation is IVALI DESIGNS & INSTALLATION, INC**
- 2. The name and address of the registered agent and office is:**

**LINCOLN MARTINEZ**

\_\_\_\_\_  
(Name)

**8362 PINES BOULEVARD # 203**

\_\_\_\_\_  
(P.O. Box or Mail Drop Box not acceptable)

**PEMBROKE PINES, FL 33024**

\_\_\_\_\_  
CITY, STATE, ZIPCODE

*Having been named registered agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

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TALLAHASSEE, FLORIDA