Division of Corporations Electronic Filing Cover Sheet

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To:		AIIA.	FEB 1	70
	Division of Corporations Fax Number : (850)617-6381	SEE	4 9	
From:	Accessed Name - Tablanda Gonnan markets const	ES	ယ္	_
	Account Name : LAZARUS CORPORATE FILING SERV Account Number : I2000000019	ice, ang.	:24	

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FLORIDA PROFIT/NON PROFIT CORPORATION LAZA REMODELING INC

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https://efile.sunbiz.org/scripts/efilcovr.exe

L Burch (FEB 1 7/18/2012

H12000042082 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:

Laza Remodeling

INC

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SECRETARY OF STATE
MATANASSEF FLORED

ARTICLE II - PRINCIPAL OFFICE

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

8770 Sunset Drive #400 Miami Fl 33173

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:

Lozaro Loza
8770 SUNSET DRIVE #400
Miami FL 33173

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ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Africies of incorporation is
LAZARO Laza
8770 SUNSET DRIVE # 400
Miami FL 33173
The undersigned incorporator has executed these Articles of Incorporation thi

ARTICLE VI- DIRECTOR (S)

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

L'AZARO. LAZA (P)

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SECRETARY OF STATE
ANTI ANIASSEF FI (NED):

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