Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone : (305)552-5973 Fax Number 2 (305)675-5944

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Equ.	1	Address	<u> </u>

FLORIDA PROFIT/NON PROFIT CORPORATION CARREL INVESTMENTS INC.

Certificate of Status	0
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Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

ARTICLE II PRINCIPAL OFFICE:

MANCIPAL OFFICE:
The principal street address and mailing address is:
1000 SW 125 Ave Ste 2081 Pembroke Pines FL 33027
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Cheryl Lopes - P&S Reginald Lopes - VP
ARTICLEV INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: Chery L Lopes 1000 SW 126 Ave. Ste208N Pembroke Pines FL 33027
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: Chery L Lopes 1000 SW 125 Ave Ste 208N Pembroke Anes FL 33027

Required Signatures:

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.