# PHCE USE ONLY (Document 1).

LAZARUS CORPORATE INDUSTRIES, INC. (Requestor's Name) 890 S.W. 87 AVENUE #16 (Address) MIAMI, FLORIDA 33174 (305)552-5973 (City, State, Zip) (Phone #) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USB ONLY (904) 385-6735 CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): Smeraldo Tine. (Corporation Name) (Document #) (Corporation Name) (Document #) THE 35 95 JAN 11 ANIO: 58 (Corporation Name) (Document #) Pick up time 2,00 Walk in Certified Copy Mail out | Will wait Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawa! Other Merger REGISTRATION/ OTHER FILNGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation

> Reinstatement Trademark

> > Examiner's Initials

Other

# CERTIFICATE OF INCORPORATION

<u>OF</u>

# SMERALDO, INC.

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The undersigned subscribers to these articles of incorporation hereby associate themselves together to form a corporation under the laws of the State of Florida.

# ARTICLE I

NAME

The name of this corporation is Smeraldo, Inc..

# ARTICLE II

# GENERAL NATURE OF BUSINESS

The corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

#### ARTICLE III

#### CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having a nominal or par value of One (\$1.00) Dollar per share. All said shares shall be payable in cash, property, labor or services at a valuation to be fixed by the Board of Directors at a meeting called for that purpose. Property, labor or services may be purchased or paid for with capital stock at a just valuation to be fixed by the Board of Directors.

#### ARTICLE IV

# INITIAL CAPITAL

The amount of capital with which this corporation will begin business is not less than \$100.

#### ARTICLE V

#### TERM\_OF\_EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE VI

## **ADDRESS**

The initial mailing address of the principal office of this corporation in the State of Florida is c/o Arazoza & Comas, P.A., 101 Madeira Avenue, Coral Gables, Fl. 33134. The Board of Directors may from time to time move the principal office to another address in Florida.

#### ARTICLE VII

# DIRECTORS

This corporation shall have not less than one director, however, the number of directors may be increased or diminished from time to time by By-laws adopted by the Stockholders, but shall never be less than one.

#### ARTICLE VIII

#### INCORPORATOR

The name and mailing address of the incorporator of these articles of incorporation is Arazoza & Comas, P.A., 101 Madeira Avenue, Coral Gables, Fl. 33134.

#### ARTICLE IX

## **AMENDMENT**

These articles of incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the Stockholders, and approved at a stockholders' meeting by two thirds of the stock entitled to vote thereon, unless all the directors and all the stockholders sign a written statement manifesting their intention that a certain amendment of these articles of incorporation be made.

# ARTICLE X

# REGISTERED OFFICE AND REGISTERED AGENT

Smeraldo, Inc., desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Incorporation at the County of Dade, State of Florida, hereby designates Arazoza & Comas, P.A. as its Registered Agent, to accept services within the State. The registered office of the corporation shall be 101 Madeira Avenue, Coral Gables, Florida.

PERSONALLY appeared before me, Carlos F. Arazoza as Managing Director of Arazoza & Comas, P.A., to me well known to be the incorporator to the foregoing Articles of Smeraldo, Inc. who being by me first duly sworn, acknowledges that he signed the same for the purposes therein expressed.

WITNESS my hand and seal at Coral Gables, Dade County,

Florida this day of MANN.TTE 1. DE Y

EXPIRES JAN 12, 18:0

NOTARY PUBLIC, STATE OF FLORIDA

AT LARGE

My commission expires:

# CERTIFICATE OF DESIGNATION

#### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, 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 Smeraldo, Inc..
- 2. The name and address of the registered agent and office is:

Arazoza & Comas, P.A. 101 Madeira Avenue Coral Gables, Florida 33134

Coral Gables, Florida 33134

Carlos F. Arazoza,

Managing Director

Date:

Date:

Having been named as registered agent and to accept Service of

Having been named as 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.

Carlos/F. Argzoza Managing Director of Arazoza & Comas, P.A.

Date: