

1-2295

**A500004880**

OFFICE USE ONLY (Document #)

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

200001400642

-02/08/95--01090--001

\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

(904)385-6735

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. M. I. C CARE SERVICES CORP  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certified Copy

☒ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

TALLAHASSEE, FLORIDA

25 JAN 19 PM 3:49

FILED

CK Sign  
1/19/95

**ARTICLES OF INCORPORATION**

**OF**

**M.I.C Care Services Corp.**

**FILED**  
**55 JAN 19 PM 3:49**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I NAME**

The name of the Corporation shall be: M.I.C. Care Services Corp

The principal place of business of this corporation shall be: 1421 SW 8 st suite 205  
Miami FL 33135

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawfull activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 Shares - 1.00 Value

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Alejandro B. Blanco  
1421 SW 8st suite 205  
Miami FL 33135

President

**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Alejandro B. Blanco

1421 SW 8 st suite 205  
Miami FL 33135

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 17 day of January, 1995

Signature(s) of Incorporator(s)

x Alejandro B. Blanco  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF Florida  
COUNTY OF Dade

THE FOREGOING instrument was acknowledged and sworn to before me this 17 day of January, 1995 by Alejandro B. Blanco FDL #B452-002-71-105-0  
(Name of incorporator)

of M.I.C. Care Services Corp.  
(Name of Corporation)

Notary Public

My Commission Expires: \_\_\_\_\_

(SEAL)  
ARTICLES OF INCORPORATION FILING FEE:

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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: M.I.C. Care Services Corp.

2 The name and address of the registered agent and office is

Alejandro B. Blanco

1421 SW 8 st suite 205

(P.O. BOX NOT ACCEPTABLE)

Miami FL 33135

(CITY/STATE/ZIP)

SIGNATURE *Alejandro B. Blanco*  
(Corporate officer)

TITLE President

DATE 01-17-95

RECEIVED  
TALLAHASSEE, FLORIDA

95 JAN 19 PM 3:49

FILED

HAVING BEEN NAMED TO ACCEPT SERVICE OR PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE *Alejandro B. Blanco*

DATE 01-17-95

REGISTERED AGENT FILING FEE.