

P95000009789

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

OFFICE USE ONLY

95 FEB - 6 PM 3:23
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

(904) 385-6735

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

1. ROBERTO VILLASANTE, P.A.
(Corporation Name) (Document #)
2. _____
(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 | |
|-------------------------------------|-------------------|
| <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 |

Examiner's Initials

KAN

789
614
524-621
671
2-6



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 3, 1995

LAZARUS

MIAMI, FL

SUBJECT: ROBERTO VILLASANTO, P.A.
Ref. Number: W95000002557

We have received your document for ROBERTO VILLASANTO, P.A. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual, another active domestic corporation, or a foreign corporation authorized to transact business within this state, having a Florida street address identical with that of the registered office.

YOU MUST REFER TO CHAPTER 621 FLORIDA STATUTE IN YOUR PREAMBLE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6931.

Steven Godfrey
Corporate Specialist

Letter Number: 195A00004748

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION
OF

95 FEB -6 PM 3:23

Roberto Villasanto, P.A.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida PROFESSIONAL CORPORATION ACT CHAPTER 621 hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

Roberto Villasanto, P.A.

ARTICLE II

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

44 West Flagler Street, Suite 1700
Miami, Florida 33130

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any time is:

500 Shares (Five Hundred) @
\$1(One Dollar)

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Roberto Villasante
44 West Flagler Street, Suite 1700
Miami, Florida 33130

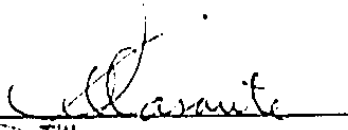
Nature of Business: Attorney

ARTICLE V INCORPORATOR(S)

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

Roberto Villasante
44 West Flagler Street, Suite 1700
Miami, Florida 33130

The undersigned has(have) executed these Articles of Incorporation this 20th day as of January, 1995.



Signature Title

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statute, 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:
Roberto Villasante, P.A.

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

Roberto Villasante, P.A.
44 West Flagler Street, Suite 1700
Miami, Florida 33130

Signature Roberto Villasante

Title _____

Date _____

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

Signature Roberto Villasante

Date _____