

P95000009790

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE INDUSTRIES, INC.

(Requestor's Name)

800 N.W. 87 AVENUE #16

(Address)

MIAMI, FLORIDA 33174 (305)552-5973

(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

RECEIVED
DIVISION OF CORPORATIONS
95 FEB -6 PM 3:27

(904) 385-6735

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

1. Diagnostics Alternative, Inc.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

RECEIVED
02/10/95 01044-018
***122.50 ***122.50

☒ 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	

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FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 3, 1995

LAZARUS

MIAMI, FL

SUBJECT: DIAGNOSTICS ALTERNATIVES, INC.
Ref. Number: W95000002567

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

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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: 395A00004752

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

CERTIFICATE OF INCORPORATION

95 FEB -6 PM 3:27

DE

DIAGNOSTICS ALTERNATIVE, INC.

ARTICLE I

NAME AND ADDRESS

The name and principal address of this corporation shall be:

DIAGNOSTICS ALTERNATIVE, INC.
PO BOX 558061
MIAMI, FLORIDA 33255

ARTICLE II

NATURE OF THE BUSINESS

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

ARTICLE III

TERM OF EXISTENCE

This Corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.

ARTICLE IV

MINIMUM CAPITAL

The amount of capital with which the corporation shall begin business shall not be less than five hundred dollars (\$ 500.00), or such greater amount as may be required by law.

ARTICLE V

NUMBER OF DIRECTORS

This Corporation shall initially have three directors but the number of directors may increase from time to time, provided that the

Corporation shall at all times have a minimum of the director.

ARTICLE VI

ORIGINAL DIRECTORS

The name and address of the original directors of the Corporation shall be:

ALBERTO G. GOMEZ
10250 SW 16th STREET
MIAMI, FLORIDA 33165-7474

ARTICLE VII

CAPITAL STOCK

This Corporation is authorized to issued five hundred shares of common stock (500), with a PAR VALUE of one dollar (\$1.00).

ARTICLE VIII

AMENDMENT

The certificate of incorporation may be amended in any manner consistent with the law of the State of Florida.

ARTICLE IX

REGISTER AGENT


The registered agent and the registered office of this corporation shall be:

ALBERTO G. GOMEZ
2741 SW 93 Ct
MIAMI, FLORIDA 33165

ARTICLE X

ACKNOWLEDGEMENT OF REGISTER AGENT

Having been named to accept services of process for the above stated Corporation, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping open said office.
Sings this 23th day of January 1995.

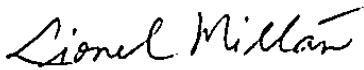


Register Agent
And Incorporator
ALBERTO G. GOMEZ

STATE OF FLORIDA)
) ss
COUNTY OF DADE)

BEFORE ME. the undersigned authority, personally appeared Alberto G. Gomez, to me well known and known to me to be the individual described in and who executed the foregoing document for the purposes therein expressed.

Signed to and subscribed before me this 23th day of January, A.D. 1995.



Notary Public
State of Florida at Large

