

P95000021503

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

95 MAR 17 1995

RECEIVED
STATE OF FLORIDA
DEPARTMENT OF REVENUE
MAR 16 PM 2:39

OFFICE USE ONLY

(904)385-6735

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

1. "SHARK INSURANCE AGENCY INC."
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy 200001435442
03/21/95--01117--021
****122.50 ****122.50

☐ 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

3-16
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

CERTIFICATE OF CORPORATION OF

95 MAR 16 PM 2:39

"SHARK INSURANCE AGENCY INC."

We, the undersigned, hereby make, subscribe and acknowledge this certificate for the purpose of becoming a corporation under the laws of the State of Florida.

1. The name of the corporation shall be:

"SHARK INSURANCE AGENCY INC,"

and its existence shall be perpetual.

2. The general nature of the business to be transacted shall be THE SALE OF INSURANCE SERVICES.

and to invest in property of any kind, operate business, lend money, and to have all other powers provided by the laws of the State of Florida.

3. The capital stock of the corporation shall consist of fifty (50) shares, without nominal par value.

4. The amount of capital with which this corporation shall begin business is not less than FIVE HUNDRED DOLLARS.

5. The principal office of the corporation in this State shall be 7786 West 34 Ln. #102, Hialeah, Fla. 33016.

6. The number of directors shall be at least one (1), and the names and post office addresses of the first Board of Directors and Officers are:

NAME	OFFICE	POST OFFICE ADDRESS
----	-----	-----
1. DANILO FERRER	PRESIDENT	7786 W. 34 Ln #102 Hialeah, Fla. 33016
2. MARIBEL FERRER	VICE-PRESIDENT	7786 W. 34 Ln #102 Hialeah, Fla. 33016

7. The names and post office addresses of the subscribers to this Certificate of Incorporation, and the number of shares each agrees to take, and the consideration therefor, the proceeds of which will amount to not less than FIVE HUNDRED DOLLARS (500.00), are as follows:

NAME AND ADDRESS -----	NO. OF SHARES -----	CONSIDERATION -----
1. DANILO FERRER 7786 W. 34 Ln #102 HIALEAH, FLA. 33016	TWENTY FIVE (25)	\$250.00
2. MARIBEL FERRER 7786 W. 34 Ln #102 HIALEAH, FLA. 33016	TWENTY FIVE (25)	\$250.00

3.

8. DANILO FERRER is hereby designated as the Register Agent for the corporation and 7786 West 34 Ln. #102, Hialeah, Fla. 33016, as the registered office of the corporation.

IN WITNESS WHEREOF, the undersigned hereby subscribe to this Certificate of Incorporation at HIALEAH, FLA. this 15th day of MARCH, 1995, for the uses and purposes aforesaid.



DANILO FERRER, president

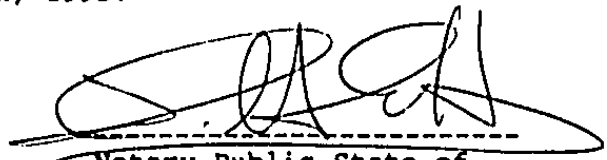


MARIBEL FERRER, vice-pres

STATE OF FLORIDA)
) SS.
COUNTY OF DADE)

BEFORE ME, the undersigned authority, personally
appeared DANILO FERRER and MARIBEL FERRER
subscriber (s) and person (s) described in and who executed
the foregoing Certificate of Incorporation, who acknowledge
before me that they did subscribe thereto, and did so for the
uses and purposes therein contained.

SWORN TO and SUBSCRIBED before me at MIAMI, Dade County,
Florida this 15th day of MARCH, 1995.


Notary Public State of
Florida at Large.

My commission expires



PEDRO A. ESTOPINAN
My Comm Exp. 3/15/98
Bonded By Service Inc
No. CC353620

☐ Personally Known ☐ Other L.B.


CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN FLORIDA NAMING AGENT UPON WHOM
PROCESS MAY BE SEDVED.

In compliance with Section 28.091, Florida Statutes, the
following is submitted:

FIRST THAT "SHARK INSURANCE AGENCY, INC."
desiring to organize or qualify under the laws
of the State of Florida, with its principal place of business
at the City of HIALEAH, State of FLORIDA has named
DANILO FERRER, City of HIALEAH, State of FLORIDA, as its agent
to accept service of process within Florida.

DANILO FERRER	PRESIDENT	03-15-95
-----	-----	-----
corporate officer	title	date

HAVING BEEN NAMED TO ACCEPT SERVICE OF 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.



RESIDENT AGENT
DATE 3-15-95