P95000033828

LAZARUS CORPORATE INDUSTRIES, INC.
(Requestor's Name)

890 S.W. 87 AVENUE, SUITE:16
(Address)

MIAMI, FLORIDA 33174 (305)552-5973
(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

(904)385-6735

OFFICE USE ONLY

700001474157
-05/03/95--01156--004
****122.50 ****122.50

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

1. AZ TRADING CORP.
(Corporation Name) (Document #)
2. (Corporation Name) (Document #)
3. (Corporation Name) (Document #)
4. (Corporation Name) (Document #)

[X] Walk in [X] Pick up time 2:30 [X] Certified Copy

[ ] Mail out [ ] Will wait [ ] Photocopy [ ] Certificate of Status

	NEW FILINGS
X	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

W95.9012
502

4-27

Examiner's Initials KA

CR2E031(10/92)

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 27, 1995

LAZARUS CORPORATE INDUSTRIES, INC.
890 S.W. 87th AVENUE
SUITE 16
MIAMI, FL 33174

SUBJECT: A Z TRADING CORP.
Ref. Number: W95000009012

We have received your document for A Z TRADING CORP. and check(s) totaling $122.50. However, your check(s) and document are being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

If you have any questions concerning the filing of your document, please call (904) 487-6915.

Kevin Nickens
Document Specialist

Letter Number: 195A00020146

ARTICLES OF INCORPORATION

OF

PINES TRADING CORP.

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

FILED
SECRETARY OF STATE
95 MAY -1 PM 4:22

ARTICLE I NAME

The name of the corporation shall be:

PINES TRADING CORP.

ARTICLE II PRINCIPAL OFFICE

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

1010 NW 185 TERRACE

PEMBROKE PINES, FLA. 33029

ARTICLE III SHARES

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

100 @ $1.00 e/o

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WALDEANE DA GAMA
1010 NW 185 TERRACE
PEMBROKE PINES, FLA. 33029

ARTICLE V INCORPORATOR(S)

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

WALDEANE DA GAMA
as THE PRESIDENT & VICE-PRESIDENT

FERNANDO DA GAMA
as THE TREASURER

BOTH ADDRESSED AT:

1010 NW 185 TERRACE

PEMBROKE PINES, FLA. 33029

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 25th day of APRIL, 19 95.

Waldeane da Gama
Signature

Fernando da Gama
Signature

Signature

Articles of Incorporation
Filing Fee - $35

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: PINES TRADING CORP.

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

WALDEANE DA GAMA
(NAME)

1010 NW 185 TERRACE
(P.O. BOX NOT ACCEPTABLE)

PEMBROKE PINES, FLA. 33029
(CITY/STATE/ZIP)

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.

SIGNATURE Waldeane da Gama

DATE APRIL 25, 1995

FILED
95 MAY -1 PM 4:22

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 NOV 18 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000033828

1 Corporation Name
PINES TRADING CORP.

Principal Place of Business	Mailing Address
1010 NW 185 TERR PEMBROKE PINES FL 33029	1010 NW 185 TERR PEMBROKE PINES FL 33029

REINSTATEMENT 96

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc. 18459 PINES BOULEVARD	Suite, Apt. #, etc. 18459 - PINES BOULEVARD
City & State SUITE #120 - PEMBROKE PINES	City & State #120 - PEMBROKE PINES
Zip 33029 Country FLORIDA	Zip 33029 Country FLORIDA

4. Date Incorporated or Qualified To Do Business in Florida: 05/01/1995

5. FEI Number: 650576015 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PV	DA GAMA, WALDEANE	1010 NW 185 TERR	PEMBROKE PINES FL 33029
T	DA GAMA, FERNANDO (NO CHANGE W/ COMPANY)	1010 NW 185 TERR	PEMBROKE PINES FL 33029
			200002011132--2 -11.21/96--01044--019 ****375.00 ****375.00
			DB 11-19-96

8. Name and Address of Current Registered Agent

DA GAMA, WALDEANE
1010 NW 185 TERR
PEMBROKE PINES FL 33029

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable): 18459 - PINES BOULEVARD
Suite, Apt. #, Etc.: SUITE #120 - PEMBROKE PINES
City: PEMBROKE PINES | State: FL | Zip Code: 33029

CR2E040 (7/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Waldeane da Gama REGISTERED Date: Oct. 12. 96

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Waldeane da Gama REGISTERED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0027000 AH