

P95000043394

FILED
95 JUN -6 PM 2:47
SECRETARY OF STATE
TALLAHASSEE

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

899 S.W. 87 AVENUE, SUITE 116
(Address)

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

LOCAL REPRESENTATIVE TALLAHASSEE

(904) 385-6735

OFFICE USE ONLY

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

1. INDEPENDENT PROCESSORS INC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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-06/08/95--01107--008
***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

CR21011(10/92)

W95-11099
NANCY HENDRICKS JUN - 6 1995
Examiner's Initials

308
531
631
671



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

May 26, 1995

LAZARUS CORPORATE INDUSTRIES, INC.
890 S.W. 87TH AVE.
SUITE 16
MIAMI, FL 33174

SUBJECT: INDEPENDENT PROCESSORS, INC.
Ref. Number: W95000011099

We have received your document for INDEPENDENT PROCESSORS, INC. and check(s) totaling \$122.50. However, your check(s) and document are being returned for the following:

Bylaws are not filed with this office. Please retain them for your records.

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

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: 795A00026872

ARTICLES OF INCORPORATION

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.

ARTICLE I NAME

The name of the corporation shall be:

Independent Processors, Inc.

ARTICLE II PRINCIPAL OFFICE

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

12818 N.W. 8th Lane, Miami, FL 33182

ARTICLE III SHARES

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

One Hundred (100) Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jacqueline Miranda
555 N.W. 72 Ave., Suite #107, Miami, FL 33126

95 JUN -6 PM 2:17
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TELETYPE

ARTICLE V INCORPORATOR(S)

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

Jacqueline Miranda

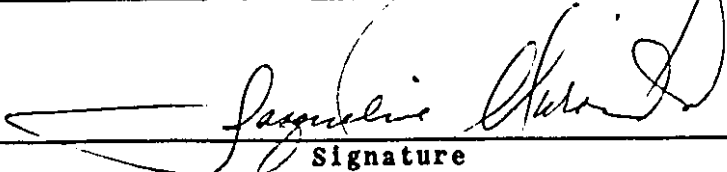
555 N.W. 72 Ave., #107
Miami, FL 33126


Eugenia ^{JA} Felipe

12818 N.W. 8th Lane
Miami, FL 33182

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

2ND day of JUNE, 1995.


Signature


Signature

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICER

Persuant 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: _____

_____ Independent Processors, Inc. _____

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

_____ Jacqueline Miranda _____

_____ (P.O. BOX NOT ACCEPTABLE) _____

_____ 555 N.W. 72 Ave., #107, Miami, FL 33126 _____

_____ (CITY/STATE/ZIP) _____

SIGNATURE _____

_____ (Corporate officer) _____

TITLE _____ Secretary _____

DATE _____ May 24, 1995 _____

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, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE _____

DATE _____ May 24, 1995 _____

REGISTERED AGENT FEE: