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LAZARUS COR	PORATE INDUSTRIES, INC.	
	AVENUE, SUITE: 16	
(۸	ddiess) IDA 33174 (305)552-5973	
(City,	State, Zip) (Phone #) SENTATIVE TALLAHASSEE	OFFICE USE ONLY
<u>(904)385-67</u>		むつのの1577278 -09/05/9501052011 *****122.50 - ****122.50
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Walk in Mail out NEW FILINGS	Pick up time <u>2700</u> Will wait Photocopy	Certified Copy
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Walk in Mail out NEW FILINGS Profit NonProfit	Pick up time <u>9100</u> Will wait Photocopy <u>AMENDMENTS</u> Amendment Resignation of R.A., Officer/	Certified Copy
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability	Pick up time <u>9700</u> Will wait Photocopy <u>AMENDMENTS</u> Amendment Resignation of R.A., Officer/ Change of Registered Agent	Certified Copy
Walk in Mail out NEW FILINGS Profit Limited Liability Domestication Other	Pick up time <u>9700</u> Will wait Photocopy <u>AMENDMENTS</u> Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger	Certified Copy
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILING	Pick up time <u>9700</u> Will wait Photocopy <u>AMENDMENTS</u> Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger	Certified Copy
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILING Annual Report	Pick up time <u>9700</u> Will wait Photocopy <u>AMENDMENTS</u> Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger	Certified Copy
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILING Annual Report Fictitious Name	Pick up time <u>9100</u> Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger SS REGISTRATION/ QUALIFICATION Foreign	Certified Copy
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILING Annual Report	Pick up time <u>9100</u> Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger SS REGISTRATION/ QUALIFICATION Foreign	Certified Copy

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CERTIFICATE OF INCORPORATION

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CRATIONS

DENT CAST DENTAL LABORATORIE. INC.

The undersigned subscribers to these Articles of Incorporation each a natural person competent to contract, hereby associate themselves together to form a corporation under the Laws of State of Florida.

ARTICLE ONE

NAME

The Name of this business Corporation shall be:

DENT CAST DENTAL LABORATORIE. INC.

ARTICLE TWO

NATURE OF BUSINESS

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

ARTICLE THREE

TERM OF EXISTENCE

This Corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida. The date on which corporate existence shall begin is:

UPON ACCEPTANCE BY THE SECRETARY OF STATE.

ARTICLE FOUR

CAPITAL STOCK

This Corporation is acthorized to issue of stock as follows:

A.- Designation: The Stock of this Corporation shall be know as common stock.

B.- Authorized: The maximun number of shares of common stock that this Corporation may issue is:-----

One Hundred (100) Shares

C.- Par Value: Each share of common stock shall have the par value of:

Ten Dollars (10.00) per value

D.- Consideration: Share of common stock may be issued in exchange for Cash, Real Property, Labor or Services rendered or any combination of the foregoing in the absence of fraud in the transaction, the judgement of the Board of the

ARTICLE NINE

SUSCRIBERS'S ADDRESSES

The Post Office addresses of the suscribers of these Article of Incorporation, the number of shares of stock each agrees to take and value of the consideration thereof are:

XIOMARA LOZADA. - 11826 S.W. 203 Terr. Minmi, Fl. 33177. One Hundred (100) Shares at \$10.00 p/v each. -----

ARTICLE TEN AMENDMENT

This Certificate of Incorporation may be amended in any manner consistent with the Laws of the State of Florida.

ARTICLE ELEVEN RESIDENT AGENT

The Resident Agent of this Corporation is:

XIOMARA LOZADA 2075 Bright Dr. Hialeah, Fl. 33010.

The Corporation may change it's Resident Agent and principal office at any time.

IN WITNESS WHEREOF, the undersigned subscribers do make, suscribe, acknowledge and file this Certificate for the purpose of forming a Corporation for profit under the Law of the State of Florida.

Date: 8/31/95

DU una criber and Resedent Agent

STATE OF FLORIDA) COUNTY OF DADE)SS

BEFORE ME, the undersigned authority personally appeared: XIOMARA LOZADA

to me well known to be the individuals described in and who executed the foregoing Cer ifferte of Incorporation and who acknowledged before me that the same executed for purposes therein expressed.-IN WITNESS WHEREOF, I hereunto affixed my hand and official seal at Miami, County of Dade, Florida, on 31 of August , 19_95.

and the second	
AFAEL MIRABAL	
AAFAEL MILDARAL	
COMMISSION INTER	
CC4071 HOMBER	

E.- Non-Assessability: Each share if common stock shall be issued in exchange for consideration which is at least equal to the par value thereof, and shall be fully -paid and Non-Assesble.

F.- Voting rights: Each share of common stock shall entitle the record holder thereof to one vote upon each proposal presented at meeting of the stockholders of the Corporation.

G.- Cumulative: No holder of common stock shall be entitle to to any right of cumulative voting.

II.- Dividends: Record holders of common stock are entitle to receive their pro-rata share of any dividens that may be declared by Board of Directors out of assets legally available for such purpose.

I.- Liquidation: Holders of common stock are entitle in the even of the liquidation or dissolution of this Cor poration to receive their pro-rata share of any assets of this Corporation remaining after payment of shall corporate debts and obligations.

ARTICLE FIVE

MINIMUM CAPITAL

ARTICLE SIX

ADDRESS

This initial post office address of principal office of this Corporation in the State of Florida is:

2075 Bright Dr. Hialeah, Fl. 33010 ARTICLE SEVEN

NUMBER OF DIRECTORS

This Corporation shall at all times have at least one (1) initially, the number of Directors may be increased or diminished from time to time in such manner as may be prescribed by the By-Laws, but shall never be less than one (1).

ARTICLE EIGHT FIRST BOARD OF DIRECTORS

The names and Post Office addresses of the members of the First Board of Directors are:

PRESIDENT:	XIOMARA	LOZADA	11826	s.₩.	203	Terrace,	Miami,	F1.
SECRETARY:	XIOMARA	LOZADA	11826	s.w.	203	Terrace,	Miami,	F1.
TREASURER;	XIQMARA	LQZADA	11826	S.W.	203	Terrace,	Miami,	FI.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate 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. DENT CAST DENTAL LABORATORIE, INC.

	the registered agent and office is:	55 56
X	IOMARA LOZADA	ר - כו
	(NAME)	- <u> </u>
	075 Bright Dr.	<u></u>
(P.O. E	SOX NOI ACCEPTABLE)	
	laleah, Fl. 33010	05
	(CITY/STATE/ZIP)	
		<u>/</u>
	· · ·	1 .
	SIGNATURE Leonicon	<u> </u>

DATE 8/31/95

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 PER-FORMANCE OF MY DUTIES. AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGA-TIONS OF MY POSITION AS REGISTERED AGENT.

cours SIGNATURE 8/31/95 DATE