

P96000000/370

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) 385-6715

OFFICE USE ONLY

600001673926  
-12/29/95--01010--033  
\*\*\*\*122.50 \*\*\*\*122.50

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

1. KING SALOMON'S MINE, 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

☐ 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

1/3/96



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

RECEIVED

96 JAN -5 AM 11:27  
DIVISION OF CORPORATION

December 29, 1995

LAZARUS CORPORATE INDUSTRIES, INC.  
890 SW 87 AVE, SUITE 16  
MIAMI, FL 33174

SUBJECT: KING SALOMON'S MINE, INC.  
Ref. Number: W95000025164

We have received your document for: KING SALOMON'S MINE, 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):

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

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) 487-6915.

Pamela Hall  
Document Specialist

Letter Number: 195A00055732

**ARTICLES OF INCORPORATION**

**OF**

**KING SALOMON'S MINE, INC.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 JAN -5 PM 2:37

The undersigned, acting as Incorporator of a Corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation.

**ARTICLE I**

**NAME**

The name of this Corporation is **KING SALOMON'S MINE, INC.**

**ARTICLE II**

**DURATION**

This Corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

**ARTICLE III**

**PURPOSE**

The general purposes for which this Corporation is organized are the following:

A. To engage in and transact any lawful business for which a corporation may be incorporated under the Florida Business Corporation Act. No other purpose limits this general purposes in any way.

B. To do such other things as are incidental to the purposes of this Corporation, or necessary or desirable in order to accomplish them.

#### ARTICLE IV

##### CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any one time is **ONE THOUSAND (1,000)** shares of Common Stock, having a par value of **ONE HUNDRED (\$100.00)** dollars per share. All said shares shall be payable in cash, property, labor, or services at a valuation to be fixed by the Board of Directors.

#### ARTICLE V

##### ADDRESS

The address of the principal office of this Corporation is: **782 NW LeJeune Road, Suite 548, Miami, Florida 33126-5536.**

#### ARTICLE VI

##### DIRECTORS

The number of Directors constituting the initial Board of Directors is **ONE (1)**. The number of Directors may be increased or decreased from time to time in accordance with the Bylaws but shall never be less than one (1).

#### ARTICLE VII

##### INITIAL DIRECTORS

The name and address of the initial Director of this Corporation are:

##### NAME

**MARTA E. PEREZ**

##### ADDRESS

**782 NW LeJeune Road  
Suite 548  
Miami, Florida 33126-5536**

**ARTICLE VIII**

**INCORPORATOR**

The name and address of the Incorporator signing these Articles of Incorporation are:

MARTA E. PEREZ

782 NW LeJeune Road  
Suite 548  
Miami, Florida 33126-5536

**ARTICLE IX**

**INITIAL REGISTERED OFFICE AND REGISTERED AGENT**

The street address of the initial Registered Office of this Corporation is 782 NW LeJeune Road, Suite 548, Miami, Florida, and the name of the initial Registered Agent at that address is JOSE M. MARQUEZ.

**ARTICLE X**

**AMENDMENT**

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the Stockholders, and approved at a Stockholders' Meeting by a majority of the stock entitled to vote thereon, unless all the Directors and all the Stockholders sign a written statement manifesting their intention that a certain Amendment to these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned Incorporator has executed  
these Articles of Incorporation, this 27th day of December, 1995.

  
MARTA E. PEREZ  
INCORPORATOR

STATE OF FLORIDA )

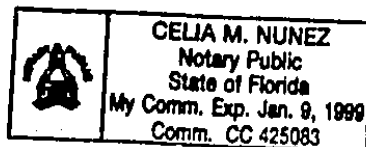
COUNTY OF DADE )

BEFORE ME, the undersigned authority, personally appeared,  
MARTA E. PEREZ, to me well known and known to me to be the person  
described in and who executed the foregoing Articles of Incorporation and  
acknowledged to and before me that he executed said instrument for the  
purposes therein expressed.

WITNESS my hand and official seal this 27th day of December, 1995.

  
NOTARY PUBLIC STATE OF FLORIDA AT LARGE

My Commission Expires:



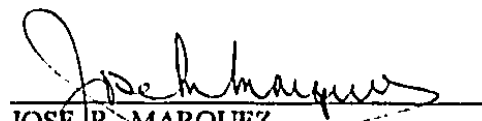
FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

ACCEPTANCE OF DESIGNATION

96 JAN -5 PM 2:37

REGISTERED AGENT/REGISTERED OFFICE

I, the undersigned person, having been named as Registered Agent and to accept service of process for the above-stated Corporation at the place designated in this statement, 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.

  
JOSE R. MARQUEZ

DATE: December 27, 1995

P.96000001370

COVER SHEET

NAME OF INCORPORATION

KING SALOMON'S MINE

NAME OF OFFICER

JUAN CARLOS PEREZ CARRION

AMOUNT ENCLOSED:

35 FOR DISSOLUTION  
8.75 FOR CERT OF STATUS

PLEASE MAIL TO

DOMINGO ALONSO  
250 VALENCIA AVE  
CORAL GABLES, FL 33134  
PHONE: (305) 4483898

FILED  
97 JAN 16 PM 12:39  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

100002060161--2  
-01/16/97--01047--003  
\*\*\*\*\*43.75 \*\*\*\*\*43.75

Uo/dis

Y8 JAN 24 1997



## ARTICLES OF DISSOLUTION

FILED  
97 JAN 16 PM 12:39  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: KING SALOMON'S MINE, INC.

SECOND: The date dissolution was authorized: DECEMBER 31st, 1996

THIRD: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by vote of the shareholders through voting groups.

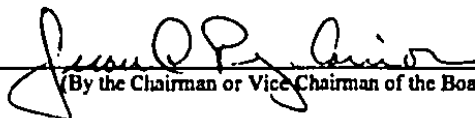
*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_  
(voting group)

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.

Signature



(By the Chairman or Vice Chairman of the Board, President, or other officer)

JUAN C. PEREZ - CARRION

(Typed or printed name)

PRESIDENT

(Title)