

P96000002002

RECEIVED

96 JAN - 8 AM 11:36

DIVISION OF CORPORATION

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

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****122.50 ****122.50

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

1. INDEPENDENT FINANCIAL SERVICES, 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

ARTICLES OF INCORPORATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JAN -8 PM 3:47

Independent Financial Services, Inc.

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE ONE
NAME

The name of the corporation is Independent Financial Services, Inc. and the principal office is located at 8900 SW 107 Avenue, Suite 302, Miami, FL 33176 or such other address as the officers may from time to time designate.

ARTICLE TWO
DURATION

The term of existence of the corporation is perpetual.

ARTICLE THREE
PURPOSE

The corporation may engage in any or all lawful business permitted to corporations under the laws of the STATE OF FLORIDA, or any other state, country, territory or nation.

ARTICLE FOUR
CAPITAL STOCK

The maximum number of shares which the corporation has authority to issue is 1,000 shares, all of which shall be common shares with a par value of \$1.00 each.

ARTICLE FIVE
REGISTERED OFFICE

The principal address of the initial registered office of the corporation shall be 8900 SW 107 Ave., Suite 302, Miami, Florida 33176. The name of the initial registered agent at such address is Robert E. Carlson.

ARTICLE SIX
PRE-EMPTIVE RIGHTS

The shareholders shall have Pre-emptive Rights.

ARTICLES

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**ARTICLE SEVEN
DIRECTORS**

The Board of Directors of the corporation shall consist of at least one member and not more than eleven.

The name and address of initial Directors of the Board is:

<u>NAME</u>	<u>ADDRESS</u>
<u>Michael J. Conway</u>	<u>8900 SW 107 Avenue, Suite 302</u> <u>Miami, Florida 33176</u>
<u>Steven C. Klein</u>	<u>8900 SW 107 Avenue</u> <u>Miami, Florida 33176</u>

INCORPORATORS

The name and address of the incorporator is:

<u>NAME</u>	<u>ADDRESS</u>
<u>Robert E. Carlson</u>	<u>8900 SW 107 Ave., Suite 302</u> <u>Miami, FL 33176</u>

IN WITNESS WHEREOF, I have subscribed my name this 3rd day of January, 1996.

Robert E. Carlson
Robert E. Carlson, Incorporator

STATE OF FLORIDA:
: SS
COUNTY OF DADE :

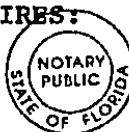
On this 3rd day of January, 1996, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared Robert E. Carlson, known to me to be the person whose name is subscribed to the within instrument, and acknowledged that he executed the same for the purpose herein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

Sylvia S. Adams
NOTARY PUBLIC
STATE OF FLORIDA AT LARGE

MY COMMISSION EXPIRES:

SYLVIA S. ADAMS
My Comm Exp: 5/25/96
Bonded By Service Ins
No. CC203430
Personally Known 11 Other L.O.



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CERTIFICATE OF DESIGNATION

REGISTERED AGENT / REGISTERED OFFICE

Pursuant 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 Financial Services, Inc.**
2. The name and address of the registered agent and office is **Robert E. Carlson, 8900 SW 107 Ave., Suite 302, Miami, FL 33176.**

Robert E. Carlson
Robert E. Carlson, Incorporator
1-03-96
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, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Robert E. Carlson
Robert E. Carlson, Registered Agent
1-03-96
Date

State of Florida
County of Dade

The foregoing instrument was acknowledged and sworn to before me this 3rd day of January, 1996.

Julius S. Adams
Notary Public

My Commission Expires:
My Comm Exp: 5/25/96
Bonded By Service Ins
No. CC203430
☒ Personally Known ☐ Other I.D.

