

P96000003633

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

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01/11/96 11:10:57  
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OFFICE USE ONLY

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

1. HELPRO 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

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96 JAN 11 AM 10:57  
DIVISION OF CORPORATION

Examiner's Initials

gj  
1/11/96

ARTICLES OF INCORPORATION

96 JUL 11 PM 2:49

OF

HELPRO INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be:

HELPRO INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

(1) / Transact any and all lawful business.

(2) Said corporation shall further have powers:

To have perpetual succession by its corporate name;

#### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 500 shares, having an individual par value of \$1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

Gamaliel Rivera  
1172 N.W. 133 Ct.  
Miami, Fl 33182

The Principal office shall be:

1172 N.W. 133 Ct.  
Miami, Fl 33182

#### ARTICLE VI

The initial Board of Directors shall consist of a total of three (3) person, and the name and address of the person who is to serve as an initial director is:

Joseph A. Lupu	Jose Cabrera	Gamaliel Rivera
7783 Cedar Aurst Ct.	15366 S.W. 42 Lane	1172 N.W. 133 Ct
Lake Worth, Fl 33467	Miami, Fl 33185	Miami, Fl 33182
President 100%	Vice-President 100%	Secretary 100%
		Treasurer

Joseph A. Lupu	Jose Cabrera	Gamaliel Rivera
7783 Cedar Aurst Ct.	15366 S.W. 42 Lane	1172 N.W. 133 Ct.
Lake Worth, Fl 33467	Miami, Fl 33185	Miami, Fl 33182

STATE OF FLORIDA }  
COUNTY OF DADE } SS.

IN WITNESS WHEREOF, I have hereunto set my hand and  
affixed my official seal in the state and county aforesaid,  
this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

**My Commission Expires:**

**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: HELPRO INC.

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

Gamaliel Rivera

(NAME)

1172 N.W. 133 Ct.

(P.O. BOX NOT ACCEPTABLE)

Miami, FL 33182

(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

Gamaliel Rivera

DATE

1-10-96