LAZARUS CORPORATE INDUSTRIES, INC. Requester's Name

890 S.W. 87 AVENUE SUTTE: 16 Address

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

LOCAL REPRESENTATIVE TALLAHASSEE

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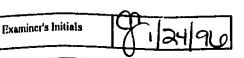
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. AS	SET	AD	minis.	TRA	TORS INC.
	(Corporation	Nauso)		(Docum	ient#)
2	(Corporation	Name)		(Docum	nent #)
3	(Corporation	Manual		(Dogum	
4.	Cooperation	Maine)		(rzodun	icht #)
·	(Corporation	Name)		(Docum	nent #)
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NEW FILINGS		AMENI	MENTS		
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NonProfit		Resignatio	n of R.A., Officer	/ Director	SG JAN 24 DIVISION OF COR
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Other		Merger			

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	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/
Foreign
Limited Partnership
Reinstatement
Trademark
Other





OF THIS PROPERTY OF THE PROPER

ARTICLES OF INCORPORATION

OF

ASSET ADMINISTRATORS, 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:

ASSET ADMINISTRATORS, 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 100 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:

David M. Zell

3900 N.W. 79th Ave Suite #450 Miami, Fl 33166

The Principal office shall be:

3900 N.W. 79th Ave Suite #450 Miami, Fl 33166

ARTICLE VI

The initial Board of Directors shall consist of a total of one (1) person, and the name and address of the person who is to serve as an initial director is:

David M. Zell

3900 N.W. 79th Ave Suite #450 Miami, F1 33166 P/VP/S/T

The name and address of the incorporator executing these Articles of Incorporation is:

David M. Zell

3900 N.W. 79th Ave Suite #450 Miami, F1 33166

IN WITNESS WHEREOF, the undersigned incorporator has

(ve) executed these Articles of Incorporation this 23 day

of January 1996.

DL.#Z400-173-58-173-0

STATE OF FLORIDA)
COUNTY OF DADE)

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally appeared David M. Zell known to me and known by me to be the person(s) who executed the foregoing Articles of Incorporation, and he (they) acknowledge before me that he (they) executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this 23 day of _______, 19 96.

NOTARY PUBLIC, STATE OF FLORIDA
AT LARGE

My Commission Expires:



CARMEN S. MORALES
Notory Public, State
My comm. expires March 31, 1997
Comm. No. CC 273265

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 Fiorida.

The name and address of the registered agent and office is:				
	DAVID M. ZELL	G Air		
	(NAME)			
	3900 N.W. 79th Ave Suite #			
	(P.O. BOX <u>NOT</u> ACCEPTABLE)	4 E		
	Miami, Fl 33166	<u>්ර</u>		
	(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 X

DATE 1-23-96