

996000010167

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

500001703915

-02/01/96--01056--019

\*\*\*\*122.50 \*\*\*\*122.50

Office Use Only

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

1. GATEWAY DISTRIBUTORS, 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

RECEIVED  
96 FEB -1 AM 11:23  
DIVISION OF CORPORATION

ARTICLES OF INCORPORATION  
OF

GATEWAY DISTRIBUTORS, INC.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 FEB -1 PM 12:43

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 Gateway Distributors, Inc. and the principal office is located at 14843 S. W. 132nd Avenue, Miami, FL, 33186, 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 900 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.

**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>14843 S. W. 132nd Avenue</u> <u>Miami, FL 33186</u>
<u>Lawrence R. Dion</u>	<u>257 E. Lucy Street</u> <u>Florida City, FL 33034</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 29th day of January, 1996.

Robert E. Carlson  
Robert E. Carlson, Incorporator

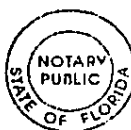
STATE OF FLORIDA:  
: SS  
COUNTY OF DADE :

On this 29th 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 ☐ Other I.D.

FILED  
SECRETARY OF STATE  
IN DEPT. OF CORPORATIONS

CERTIFICATE OF DESIGNATION

96 FEB -1 PM 12:43

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 **Gateway Distributors, Inc.**
2. The name and address of the registered agent and office is Robert E. Carlson, 8900 SW 107 Avenue, Suite 302, Miami, Florida 33176

Robert E. Carlson

Robert E. Carlson, Incorporator

1-29-96

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

1-29-96

Date

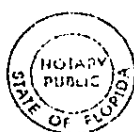
State of Florida  
County of Dade

The foregoing instrument was acknowledged and sworn to before me this 29th day of January, 1996.

Sylvia S. Adams

Notary Public

My Commission Expires:



SYLVIA S. ADAMS  
My Comm Exp. 5/25/96  
Bonded By Service Ins  
No. CC203430  
☒ Personally Known ☐ Other I. D.