

P96000013635

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

700001711587

-02/09/96--01072--010

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

Office Use Only

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

1. MICRO SERVICES INDUSTRIES 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               |

FILED  
96 FEB 13 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

~~496-2050~~

RECEIVED  
96 FEB -9 AM 11:32  
DIVISION OF CORPORATION

~~ECT~~

Bmc 2/9/96



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

February 9, 1996

LAZARUS CORPORATE INDUSTRIES, INC.  
890 S.W. 87 AVENUE STE 16  
MIAMI, FL 33174

SUBJECT: MICRO SERVICES INDUSTRIES INC.  
Ref. Number: W96000003050

We have received your document for MICRO SERVICES INDUSTRIES 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):

Please provide the name and capacity of the person signing as registered agent.

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) 487-6923.

Doris McDuffie  
Corporate Specialist Supervisor

Letter Number: 296A00005820

*P96-13635*

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96 FEB 13 PM 2:48  
DIVISION OF CORPORATION

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96 FEB 13 PM 3:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF

MICRO SERVICES INDUSTRIES 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 of 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: MICRO SERVICES  
INDUSTRIES INC.

ARTICLE II

This corporation shall commence existence upon the filing of this 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:

Micro Services Industries INC

### 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 this article, there shall be only one (1) class of Stock of this corporation.

### ARTICLE V

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

C&G Accounting Services of MIAMI INC.  
2595 SW 87 AVE MIAMI FL 33165

ARTICLE VI

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

TREVOR Campbell

6163 NW 182 TER

MIAMI FL 3305

Mario A Campbell

Same.

Lea A. Campbell

Same.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/ REGISTERED OFFICE

FILED  
96 FEB 13 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of the section 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: MICRO SERVICES  
Industries. INC.

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

C & G Accounting Services OF MIAMI INC.  
(NAME)

2595 SW 87 AVE  
(P.O. BOX NOT ACCEPTABLE)

MIAMI FL 33165  
(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. IN FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATES 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

Guillermo Donadio  
GUILLERMO DONADIO

Date

2-8-96

PRESIDENT