# 96000019765

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LAZARUS CORPORATE (Requestor's Name)  890 S.W. 87 AVENUE (Address) MIAMI, FLORIDA 33 (City, State, Zip) LOCAL REPRESENTATI (904) 385-6715	SUITE: 16  174 (305)552-5973 (Phone #)	OFFICE USE ONLY	# # # # # # # # # # # # # # # # # # #	3 45:11 %: 20~ 022 • (+ )5, 00 —
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NEW FILINGS	AMENDMENTS	<b>根</b> 學監察	13	
Profit	Amendment	<del></del>		
NonProfit	Resignation of R.A., Officer/D	irector		
Limited Liability	Change of Registered Agent	····		
Domestication Dissolution/Withdrawal		<del></del>		
Other	Merger			
OTHER FILINGS	REGISTRATION/			
Annual Report	Foreign			
Fictitious Name	Limited Partnership			
Vanie Reservation	Reinstatement			

Examiner's Initials

Trademark

Other

CR2E031(10/92)



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 5, 1995

**LAZARUS** 

SUBJECT: SOUTH FLORIDA HOME FOR THE AGED INC.

Ref. Number: P95000041217

We have received your document for SOUTH FLORIDA HOME FOR THE AGED INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

PLEASE ENTITLE EACH ARTICLE BEING AMENDED. ARE YOU CHANGING THE OFFICERS, DIRECTORS OR REGISTERED AGENT ETC.?

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6906.

Darlene Connell Corporate Specialist

Letter Number: 695A00052889

## ARTICLES OF INCORPORATION

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

. MEX-PLACE INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7529 Hayes Street, Hollywood, Florida, 33024.-

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE HUNDRED SHARES (100) WITH (\$5.00) DOLLARS PER VALUE PER SHARE.

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EDINSON LIBREROS

7529 Hayes Street, Hollywood,Fl, 33024

#### ARTICLE V INCORPORATORISI

The name(s) and street address(es) of the incorporator(s) to these Articles of incorporation is(are):

EDINSON LIBREROS

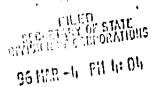
7529 Hayes Street, Hollywood, F1, 33024

22	day of	February	, 19 <u>96</u>	- •
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Articles of Incorporation Filing Fee - \$35

Signatura

# 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.

•	The name of the corporation is: MEX-PLACE INC.
	•
٠	The name and address of the registered agent and office is:
_	EDINSON LIBREROS
	(NAME)
	7529 Hayes Street,
	(P.O. BOX <u>NOT</u> ACCEPTABLE)
	Hollywood, Florida, 33024
	(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 🔼

DATE

February 22,1996