

P96000020088

LAZARUS CORPORATE INDUSTRIES, INC.  
Requestor's Name

890 S.W. 07 AVENUE SUITE: 16  
Address

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

LOCAL REPRESENTATIVE TALLAHASSEE

600001732936  
-03/05/96--01084--011  
\*\*\*1347.50 \*\*\*\*122.50  
Office Use Only

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

1. AUTOMOTOPA TOP CAR U.S.A. 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  
56 MAR -5 AM 11:45  
DIVISION OF CORPORATION

03/5/96

ARTICLES OF INCORPORATION

OF

AUTOMOTORA TOP-CAR U.S.A. INC.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 MAR -5 PM 2:04

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:  
AUTOMOTORA TOP-CAR U.S.A. 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 1,000 shares, having an individual par value of \$100.00

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:

DR. RAFAEL B. MEDINA, PH.D.  
5445 COLLINS AVENUE UNIT CU-17  
Miami, FLORIDA 33140

The Principal office shall be:

5275 N.W. 7th ST.  
Miami, FL. 33126

#### ARTICLE VI

The initial Board of Directors shall consist of a total of two (2) person, and the name and address of the person who is to serve as an initial director is:

ALVARO QUEZADA KULCEWSKI  
CALLE ELIODORO YANES #1335  
SANTIAGO CHILE

JORGE BRUCHEN MACFARLANE  
CALLE BELTRAN #1990  
SANTIAGO - CHILE

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

RAFAEL B. MEDINA  
5415 COLLINS AVENUE CU-17  
MIAMI BEACH, FL 33140

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 4 day of March, 1996.

Rafael B. Medina

STATE OF FLORIDA     }  
COUNTY OF DADE     } SS.

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally appeared \_\_\_\_\_ 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 \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

NOTARY PUBLIC, STATE OF FLORIDA  
AT LARGE

**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: AUTOMOTORA TOP-CAR U.S.A. INC.

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

DR. RAFAEL MEDINA PH.D  
(NAME)

5445 COLLINS AVENUE CU-17  
(P.O. BOX NOT ACCEPTABLE)

MIAMI FL 33140  
(CITY/STATE/ZIP)

FILED  
STATE OF FLORIDA  
CLERK OF THE CIRCUIT COURT  
96 MAR -5 PM 2:04

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

Rafael M. Medina

DATE 3-4-96