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

Office Use Only

CORPORATION	NAME(S) & DOCUM	ient number(s), (if k	iown):
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3(Cor	poration Name)	(Document #)	APR+3
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Profit	Amendment		RECEIVED 54PR -3 AMID: 8 SICH OF COAPSE/
NonProfit	Resignation of R.A.,	Officer/ Director	7 G A
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Fictitious Name	Foreign		

Limited Partnership

Reinstatement

Trademark

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Examiner's Initials

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Name Reservation



ARTICLES OF INCORPORATION OF

96 APR -3 PIL 1: 24

CASTILLA - LEON, 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 CORPORATOR, 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 CASTILLA- LEON, INC.

ARTICLETI

THIS NAME OF 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 THIS 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 SUCCECSION BY ITS CORPORATED NAME.

<u>ARTICLE IV</u>

THE AGGREGATE NUMBER OF SHARES WHICH THE CORPORATION SHALL HAVE THE AUTHORITY TO ISSUE IS THE TOTAL SUM OF 100 SHARES HAVING A INDIVIDUAL PAR VALUE OF 1,000,-

UNLESS OTHERWISE STARTED IN THESE ARTICLES, OR IN AN AMENDMENT TO THESE ARTICLES, THERE SHALL BE ONLY ONE (1) CLASS OF STOCK OF THIS CORPORATION.

ARTICLE Y

THE STREET ADDRESS OF THE INITIAL PRINCIPAL OFFICE AND THE NAME OF THE INITIAL RESIDENT AGENTS OF THIS CORPORATION SHALL BE MR. MANUEL MARIO PEREZ, 7920 N.W. 166ST., MIAMI, FL. 33016.

ARTICLE_VI

THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF A TOTAL TWO (2) PERSONS, AND THE NAME AND ADDRESS OF THE PERSONS WHO IS TO SERVE AS INITIAL DIRECTOR IS MR. M. MARIO PEREZ RIVERA, PRESIDENT, MR JUAN CASAS, SECRETARY.

THE NAME AND ADDRESS OF THE INCORPORATOR EXECUTING THESE ARTIXLES OF INCORPORATION IS MR. MANUEL MARIO PEREZ RIVERA , 7920 N.W. 1668T.,MJAMI,FL.33016.

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR HAS (VE) EXECUTED THESE ARTICLES OF INCORPORATION THIS 15 DAY OF MARCH 1996.

Mr. M. Mario Perez Rivera.

President

STATE OF FLORIDA)

Mr. Juan Casas Secretary.

) SS. COUNTY OF DADE)

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE ACKNOWLEDGE, MENTS IN THE STATE AND COUNTY SET FORTH ABOVE, PERSONALLY APPEARED MR. MANUEL MARIO PEREZ RIVERA AND MR. JUAN CASAS, KNOWN TO ME AND KNOWN BY ME TO BE THE PERSON WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION, AND HE ACKNOWLEDGE BEFORE ME THAT HE EXECUTED THOSE ARTICLES OF INCORPORATION.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AFFIXED MY OFFICIAL SEAL IN THE STATE AND COUNTY AFORSAID, THIS 15 DAY OF MARCH 1996.

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

MY COMMISION EXPIRES:

OPPOSITE OFFICIAL HOTARY SEAL NORMA C BARO COMMISSION NUMBER C C 433531
MY COMMISSION EXP.
JAN. 16,1999

FILED
SECRETARY OF STATE
ONY LIGHT OF CORPORATIONS

96 APR -3 PH 1: 24

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: CASTILLA-LEON, INC.
- 2.- THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

MANUEL MARIO PEREZ
7920 N.W. 166Street
MIAMI LAKES, FLORIDA 33016

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNED 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 STATUS RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF ALL MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE