REQUESTOR'S Name 890 S.W. 87 AVENUE SUITE: 16 Address #\$ \$ 02 00 48 1 \$ 5 508, 252 727 \$ - 0577 \$ 250 5 - 014 \$55 00 \$ - 3 3 5 4 127, 50 - 3 1 4 1 5 2 2 5 6 6 MIAMI, FLORIDA 33174 (305)552-5973 City/State/Zip Office Use Only LOCAL REPRESENTATIVE TALLAHASSEE CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): MANAGENENT SERVICES, INC (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ₩alk in Pick up time 2,00 Certified Copy "I Mail out Certificate of Station Will wait ☐ Photocopy 機數NEW FILINGS \$ AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent **Domestication** Dissolution/Withdrawal Other Merger OTHER FILINGS QUALIFICATION **Annual Report** Foreign Fictitious Name W96-10772 Limited Partnership Name Reservation Reinstatement Trademark

Other



May 21, 1996

LAZARUS CORPORATE INDUSTRIES, INC. 890 SW 87 AVE., STE. 16 MIAMI, FL 33174

SUBJECT: DIVERSIFIED MANAGEMENT SERVICES, INC. Ref. Number: W96000010772

We have received your document for DIVERSIFIED MANAGEMENT SERVICES, 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):

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.

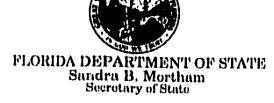
If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please 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) 487-6052.

Sandy Ng Document Specialist

Letter Number: 296A00025161



June 6, 1996

LAZARUS CORPORATE INDUSTRIES, INC. 890 SW 87 AVE., STE. 16 MIAMI, FL 33174

SUBJECT: BEST MANAGEMENT SERVICES, INC. Ref. Number: W96000010772

We have received your document for BEST MANAGEMENT SERVICES, 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):

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 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) 487-6052.

Sandy Ng Document Specialist

Letter Number: 296A00025161

FILED 96 JUN-7 AMIL 27 TALLAHASSEE, FLORIDA

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, dut as and obligations of the undersigned as incorporator, and those of the comporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be: Complete Management Services, Inc.

ARTICLE 11

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 db, 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 **500** shares, having an individual par value of \$1.00 (one dollar)

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

Daniel Ayala
12159 South West 132 Court
Suite 203-B
Miami, Florida 33186

ARTICLE VI

The initial Board of Directors shall consist of a total of one (1) person, and the name and address of the person who is to serve as an initial director is:

Daniel Ayala 12159 South West 132 Court Suite 203-B Miami, Florida 33186 The name and address of the incorporator executing these Articles of Incorporation is:

Daniel Ayala 12159 South West 132 Court Suite 203-B Miami, Florida 33186

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

My Commission Expires:

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 i.. designating the registered office/registered agent, in the State of Florida.

1.	The name of the corporation is: Complete Management Services, Inc.
?.	The name and address of the registered agent and office is:
	Daniel Ayela
	, (NAME)
	12159 South West 132 Court. Suite 203-B
	(P.O. BOX NOT ACCEPTABLE)
	Miami, Florida 33186
	(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

5-20-56

96 JUN-7 MIII:27
SECRETARY OF STATE
TALLAHASSEE, FLORIE