

P96000061029

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

1. Custom Carpet Installations, Inc
(Corporation Name) (Document #)

2. _____ (Corporation Name) (Document #) SECRETARY OF STATE
-07/22/96--01036--002
*****70.00 *****70.00

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
95 JUL 22 PM 1:11
RECEIVED
95 JUL 22 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATION

7-22-96
KR

BEST BUSINESS & TAX INC.
2016 NE 164TH STREET
NORTH MIAMI BEACH, FLORIDA 33162

FILED
JUL 22 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JULY 7TH 1996

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Gentlemen:

RE: CUSTOM CARPET INSTALLATIONS, INC.

Kindly find enclosed ARTICLES OF INCORPORATION executed on JULY 7TH, 1996, for registration with your offices as a State of Florida Corporation.

A duplicate executed copy is also enclosed for CERTIFICATION by your offices and return to the undersigned.

I further enclose CERTIFICATE designating the RESIDENT AGENT, dated JULY 7TH, 1996, as executed by the Corporate Officer and Resident Agent.

A check is enclosed in the amount of \$70.00 payable to the Florida Department of State for the following costs:

| | | |
|----|----------------------------|-----------------|
| A) | FILING FEE | \$ 35.00 |
| B) | RESIDENT AGENT DESIGNATION | 35.00 |
| | TOTAL COST | <u>\$ 70.00</u> |

Thanking you kindly for your attention and interest, I am
Cordially Yours,


MICHAEL A. RAUF

ARTICLES OF INCORPORATION
OF
CUSTOM CARPET INSTALLATIONS, INC.

FILED
96 JUL 22 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

THE NAME OF THIS CORPORATION IS CUSTOM CARPET INSTALLATIONS INC.

ARTICLE II

This corporation shall have perpetual existence.

ARTICLE III

This corporation shall engage in the business of CARPET INSTALLATIONS as well as any other activities permitted under the laws of United States and State of Florida

ARTICLE IV

The total number of shares of stock which the corporation shall have the authority to issue is FIVE HUNDRED (500) SHARES which shall be no par value, and shall have equal rights, privileges and voting power.

ARTICLE V

The amount of shares of capital which this corporation shall begin business is FIVE HUNDRED & NO/100 DOLLARS (\$500.00) the proceeds of stock subscribed for will at least be as much as the amount necessary to begin business

ARTICLE VI

The street address of the initial principal office of this corporation is: 19270 N.W. 22ND ST. PEMBROKE PINES COUNTY OF BROWARD STATE OF FLORIDA, 33029.

and the initial REGISTERED AGENT of this corporation is
CURTIS A. SHOBE OF 19270 N.W. 22ND ST. PEMBROKE PINES
FLORIDA 33029

ARTICLE VII

This corporation shall have TWO (2) DIRECTORS initially. The number of Directors may be either increased or decreased from time to time by the By-laws, but shall never be less than one (1).

The name and address of the initial Director of this corporation is : CURTIS A. SHOBE 19270 N.W. 22ND ST. PEMBROKE PINES FL-33029

ARTICLE VIII

The name and address of the person signing these ARTICLES OF INCORPORATION is: CURTIS A. SHOBE OF 19270 N.W. 22ND ST. PEMBROKE PINES, FLORIDA 33029

ARTICLE IX

This corporation reserves the right to Amend or Repeal any of the provisions contained in these ARTICLES OF INCORPORATION or any of its AMENDMENTS thereto, and any right conferred upon the SHAREHOLDERS is subject to this reservation.

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBER HAS EXECUTED THESE ARTICLES OF INCORPORATION ON JULY 7TH 1996



CURTIS. A. SHOBE
INCORPORATOR.

**CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR SERVICE AND PROCESS
WITHIN FLORIDA, NAMING RESIDENT AGENT UPON WHOM SERVICE CAN BE MADE:**

**IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE
FOLLOWING IS SUBMITTED:**

**FIRST THAT CUSTOM CARPET INSTALLATIONS, INC. DESIRING
TO ORGANISE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA
WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE PEMBROKE PINES
BROWARD COUNTY., STATE OF FLORIDA, CURTIS A. SHOBE AT
19270 N.W. 22ND ST. PEMBROKE PINES, FL 33029
FLORIDA AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.**

SIGNATURE



(CORPORATE OFFICER)

TITLE


PRESIDENT

DATE

JULY 7TH 1996

**HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I
HEREBY AGREE TO ACT IN THAT CAPACITY, AND I FURTHER AGREE TO COMPLY
WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COM-
LETE PERFORMANCE OF MY DUTIES.**

SIGNATURE



(RESIDENT AGENT)

DATE

JULY 7TH 1996

FILED
96 JUL 22 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)

COUNTY OF DADE)

SS

BEFORE ME, a Notary Public, authorized to take acknowledgements in the State and County last aforesaid, personally appeared before me CURTIS A. SHODE known to me to be the person who so executed the foregoing ARTICLES OF INCORPORATION, and he acknowledge before me that he executed the ARTICLES OF INCORPORATION for the uses and purposes therein expressed.

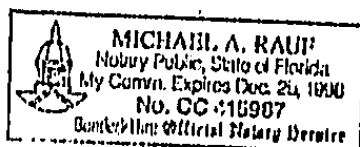
IN WITNESS WHEREOF, I have hereinto set my hand and affixed my seal in the State and County last aforesaid on JULY 7TH 1996

Michael A. Raup

Notary Public
State of Florida at Large

My commission expires

Notarial Seal/Stamp



FILED
96 JUL 22 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA