

P96000081147

LAZARUS CORPORATE INDUSTRIES, INC.
Requestor's Name

890 S.W. 87 AVENUE SUITE 16
Address

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

LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

FILED
96 OCT -1 PM 1:36
TALLAHASSEE, FLORIDA

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

1. DIAGNOSTIC DIET AND LASER CENTER INC.
(Corporation Name) (Document #)

2. _____ (Corporation Name) (Document #) 10/01/96 01121-015
***122.50 ***122.50

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
96 OCT -1 AM 10:59
DIVISION OF CORPORATION

ARTICLES OF INCORPORATION

FILED
96 OCT -1 PM 1:36
TALLAHASSEE, FLORIDA

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:

DIAGNOSTIC, DIET AND LASER CENTER INC.

ARTICLE II PRINCIPAL OFFICE

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

11352 SW 184th ST
MIAMI FL, 33157

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOSE ANTONIO NOVOA
11352 SW 184th ST
MIAMI, FL 33157

ARTICLE V. INCORPORATOR(S)

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

JOSE ANTONIO NOVOA 50%
ANA MARIA PENA 50%

11352 SW 184th ST
MIAMI, FL 33157
ARTICLE VI DIRECTOR(S)

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

JOSE ANTONIO NOVOA -PRESIDENT
ANA MARIA PENA -TREASURER-SECRETARY

11352 SW 184th ST
MIAMI, FL. 33157

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20 day of SEPTEMBER, 1996

x Jose Antonio Novoa
Signature
Ana Maria Pena
Signature

Signature

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: DIAGNOSTIC, DIET AND LASER CENTER, INC

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

JOSE ANTONIO NOVOA

(NAME)

11352 SW 184th st

(P.O. BOX NOT ACCEPTABLE)

MIAMI, FL. 33157

(CITY/STATE/ZIP)

FILED
56 OCT -1 PM 1:36
TALLAHASSEE, FLORIDA

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

X Jose A. Noya

DATE SEPTEMBER 20/96

REGISTERED AGENT FILING FEE: \$35.00

P96000081147

LAZARUS CORPORATE INDUSTRIES, INC.
Requestor's Name

890 S.W. 87 AVENUE SUITE: 16
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MIAMI, FLORIDA 33174 (305)552-5973
City/State/Zip Phone #
LOCAL REPRESENTATIVE TALLAHASSEE

8000002120400--4
-03/21/97--01041--025
*****35.00 *****35.00
Office Use Only

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

1. DIAGNOSTIC, DIET AND LASER CENTER, INC.
(Corporation Name) (Document #)
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FILED
97 APR 18 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
97 MAR 21 AM 10:42
DIVISION OF CORPORATION

Amendment
4/18/97

PC

97 APR 17 PM 3:46
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 15, 1997

LAZARUS

MIAMI, FL

SUBJECT: DIAGNOSTIC, DIET AND LASER CENTER INC.
Ref. Number: P96000081147

We have received your document for DIAGNOSTIC, DIET AND LASER CENTER 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):

Please indicate exactly what is being amended.

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) 487-6906.

Darlene Connell
Corporate Specialist

Letter Number: 797A00018908



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 21, 1997

LAZARUS

MIAMI, FL

SUBJECT: DIAGNOSTIC, DIET AND LASER CENTER INC.
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We have received your document for DIAGNOSTIC, DIET AND LASER CENTER 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 current name of the entity is as referenced above. Please correct your document accordingly.

Please entitle each article being amended. We need an address for each person listed as an officer/director or registered agent.

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) 487-6906.

Darlene Connell
Corporate Specialist

Letter Number: 897A00014489

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF

Diagnostic, Diet and Laser Center Inc.

P96000081147

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

Article IV - *Registered Agent*

(add): Jose A. Novoa at 11352 SW 184TH St., Miami, FL 33157

Article VI - *DIRECTORS*

(delete): Ana Maria Pena *S/T*

(add): Jose Antonio Novoa
the title of President of said Corporation.

Same address

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

FILED
97 APR 18 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THIRD: The date of each amendment's adoption: January 7th, 1997.

FOURTH: Adoption of Amendment(s) (check one).

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____"
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 7th day of January, 19 97.

Signature

Cara Patricia Perry
(By the Chairman or Vice Chairman of the Board of Directors,
President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an Incorporator if adopted by the Incorporators)

Cara Patricia Perry
Typed or printed name

Secretary/Treasurer
Title

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

John C. Perry
DATE

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Requestor's Name

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(By the Chairman or Vice Chairman of the Board of Directors,
President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

Carol Patricia Perry
Typed or printed name

Secretary Treasurer
Title

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