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	J, C, ENTERNO (Corporation Name)	CISES INC.	TAL 96
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Walk in

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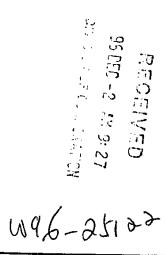
Certificate of Status

NEW FILINGS		
X	Profit	
	NonProfit	
	Limited Liability	
	Domestication	
	Other	

齫	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

開開	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
<u> </u>	Foreign
	Limited Partnership
	Reinstatement
ļ	Trademark
	Other



Examiner's Initials

DEC - 3 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 2, 1996

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

SUBJECT: J.C. ENTERPRISES INC. Ref. Number: W96000025122

We have received your document for J.C. ENTERPRISES 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: 696A00053906

ARTICLES OF INCORPORATION

IN 96 DEC -3 AHIII: 23

TALLAHASSEE, FLORIDA

Opportunition under the

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: J.C.N. SPECIALTIES INC.

ARTICLE II PRINCIPAL OFFICE

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

850 N.W. 87 AVE, #104 MIANI, FLORIDA 33172

ARTICLE III SHÀRES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the Initial registered agent is: 5 JUANCARLOS NODARSE STAVE. #104
850 N.W. 87 AVE. #104
MIAMI, FLORIDA 33172

ARTICLE V INCORPORATOR(S)

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

JUAN CARLOS NODARSE

850 N.W. 87 AVE. # 104

MIAMI, FLORIDA 33172

ARTICLE VI DIRECTOR(S)

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

JUAN CARLOS NODARSE

850 N.W. 87 AVE. # 104

MIAMI, FLORIDA 33172

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

15 day of NOVEMBER 19 915.

JUAN CARLOS NODARSE

850 N.W. 87 AVE. # 104

MIAMI, FLORIDA 33172

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

Signature

Articles of Incorporation Filing Fee - \$35

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.

The harme of the corporation is.
2. The name and address of the registered agent and office in:
Fo 2
2. The name and address of the registered agent and office is:
JUAN CARLOS NODARSE
JUAN CARLOS MODARSE
(NAME)
850 NW 87 AVE # 104
(P.O. BOX <u>NOT</u> ACCEPTABLE)
Mani, FLORIDA, 33172
(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.
DATE 11 15 96