# LAZARUS CORPORATE INDUSTRIES, INC. Requestor's Name 890 S.W. 87 AVENUE SUITE: 16 Address 600002023

MIAMI, FLORIDA 33174 (305)552-5973

City/State/Zip Phone #

City/State/Zip Phone #
LOCAL REPRESENTATIVE TALLAHASSEE

60002023286——8 -12/09/96--01023--004 \*\*\*\*122.50 \*\*\*\*122.50 Office Use Only

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

|                   | 1. JL M1          | LDING A        | ND CABIN               | VETS, IN       | <i>.</i>    |
|-------------------|-------------------|----------------|------------------------|----------------|-------------|
|                   | 2. <u>(Co</u>     | oration Name)  | (Decum                 | ent#)          |             |
|                   | 3(Co              | oration Name)  | (Docum                 | ent#)          | 96<br>SE    |
|                   | 4(Co              | oration Name)  | (Docum                 | ent#)          | ECA PEC     |
|                   | Walk in           | Pick up time   |                        | B Certified Co | py PHIZ:    |
|                   | Mail out          | Will wait      | Photocopy              | Certificate o  | States 3    |
| Verley<br>Verlagy | NEW FILINGS       | AMENDM         | ENTS                   |                | <b>&gt;</b> |
| X                 | Profit            | Amendment      |                        |                |             |
|                   | NonProfit         | Resignation of | R.A., Officer/Director |                |             |
|                   | Limited Liability | Change of Reg  | istered Agent          |                |             |
|                   | Domestication     | Dissolution/Wi | thdrawal               |                |             |
|                   | Other             | Merger         |                        |                | <b>.</b>    |

| OTHER FILINGS    |
|------------------|
| Annual Report    |
| Fictitious Name  |
| Name Reservation |

| REGISTRATIONA<br>OUALIRIGATION |
|--------------------------------|
| Foreign                        |
| Limited Partnership            |
| Reinstalement                  |
| Trademark                      |
| Other                          |

RECEIVED 96 DEC-9 AMII: 05 WISHUR OF CORPORATION

CR2E031(1/95)

Examiner's Initial

DEC - 911996

# BEST BUSINESS & TAX INC. 2016 NE 164TH STREET NORTH MIAMI BEACH, FLORIDA 331

JANUARY 2ND, 1997

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

Gentlemen:

RE: J L MOLDING AND CABINETS, INC.

Kindly find enclosed ARTICLES OF INCORPORATION executed on JANUARY 2ND, 1997. 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 JANUARY 2ND 1997 as execured by the Corporate Officer and Resident Agent.

A check is enclosed in the amount of \$122.50 payable to the Florida Department of State for the following costs:

| A) | FILING FEE                                  | \$ 35.00              |
|----|---|-----------------------|
| B) | CERTIFIED COPY OF ARTICLES OF INCORPORATION | \$ 52.50              |
| C) | RESIDENT AGENT DESIGNATION<br>TOTAL COST    | \$ 35.00<br>\$ 122.50 |

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

Michael A. RAUF

JL MOLDING AND CABINETS, INC.

# ARTICLE I

THE NAME OF THIS CORPORATION IS JL MOLDING AND CABINETS, INC.

## ARTICLE II

This corporation shall have perpetual existence.

# ARTICLE III

This corporation shall engage in the business of MOLDING & CABINETS MANUFACTURING 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: 8717 N.W.117TH STREET, BAY 4, HIALEAH GARDENS, FLORIDA 33016

And the initial REGISTERED AGENT of this corpration is JUAN LUIS MENDOZA, 8717 N.W. 117TH STREET, BAY 4, HIALEAH GARDENS, FLORIDA 33016

# ARTICLE VII

This corporation shall have ONE DIRECTOR initially JUAN LUIS MENDOZA. 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 inital Director of this corporation is: JUAN LUIS MENDOZA, 8717 N.W. 117TH STREET, BAY 4, HIALEAH GARDEN, FLORIDA. 33016

### ARTICLE VIII

The name and address of the person signing these ARTICLES OF INCORPORATION is: JUAN LUIS MENDOZA, 8717 N.W. 117TH STREET, HIALEAH GARDEN, FLORIDA. 33016

### 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 JANUARY 2ND, 1997

JURO LUIS MENDOZA INDORPORATOR 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 STATUES, THE FOLLOWING IS SUBMITTED:

FIRST THAT JL MOLDING AND CABINETS, INC. DESIRING TO ORGANISE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE HIALEAH GARDENS, DADE, STATE OF FLORIDA, JUAN LUIS MENDOZA AT 8717 N.W. 117TH STREET, HIALEAH GARDENS, FORIDA 33016

AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE

(CORPORATE OFFICER)
PRESIDENT

TITLE

DATE

JANUARY 2ND 1997

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 STATUES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE

DATE

(RESIDENT AGENT)

(JANUARY 2ND 1997

STATE OF FLORIDA)
, SS
COUNTY OF DADE )

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

IN WITNESS WHEREOF, I have here into set my hand and affixed my seal in the State and County last aforesaid on JANUARY 2ND 1997.

Notary Public

State of Florida at Large

My commission expires

MICHAEL A. RAUP Notary Public, State of Florida My Comm. Expires Dec. 25, 1948 7 No. CC 415987 Bonded Thru Witteld Natury Service Notarial Seal/Stamp