

P970000 20519

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

000002124770--5  
-03/26/97--01085--025  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

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

1. MAR-MAX SERVICE, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

FILED  
97 APR -4 PM 1:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- ☒ Walk in ☒ Pick up time 2:00 ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate or 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 checked="" 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

AM 4/4  
#00789, 00524  
00672

RECEIVED  
97 MAR 26 AM 11:09

Examiner's Initials



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
Secretary of State

March 27, 1997

Lazarus Corporate Industries, Inc.  
890 S.W. 87 Avenue  
Suite 16  
Miami, FL 33174

**SUBJECT: MAR-MAX SERVICE INC**  
Ref. Number: P97000020519

We have received your document for MAR-MAX SERVICE 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 use the attached Change of Registered Agent form to change your registered agent. The Certificate of Designation that you submitted is for a new corporation.

If you have any questions concerning the filing of your document, please call (904) 487-6907.

Annette Hogan  
Corporate Specialist

Letter Number: 697A00015586

RECEIVED  
97 APR -4 AM 10:37  
DIVISION OF CORPORATION

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
MAR-MAX SERVICE INC

FILED  
97 APR -4 PM 1:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO SECTION 607.1006, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION ADOPTED THE FOLLOWING ARTICLES TO AMEND TO ITS ARTICLES OF INCORPORATION.

FIRST: Modify the Article VII as follow:

Change of Directors from Jose Martinez as incorporator  
to Veronica Alarcon as Director, President, Treasurer and  
Secretary

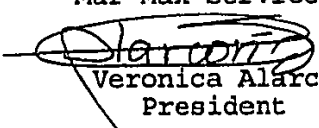
SECOND: The name and address of the registered agent and

office is: Jose Martinez  
8290 Lake Drive Apt-323 Miami, Fl. 33166

The name and address of the new registered agent  
and office is: Veronica Alarcon  
8290 Lake Drive Apt-323 Miami, Fl. 33166

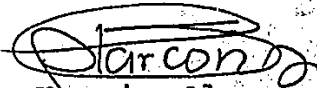
THIS ARTICLES OF AMENDMENT WAS ADOPTED ON MARCH 24, 1997  
THE CORPORATION HAS ONLY ONE GROUP OF VOTING STOCK. THIS  
AMENDMENT WAS UNANIMOUSLY ADOPTED. THE AMENDMENT WAS APPROVED  
BY THE SHAREHOLDERS.  
THE NUMBER OF VOTES CAST FOR AMENDMENT WAS SUFFICIENT FOR  
APPROVAL.

Mar-Max Service Inc

  
Veronica Alarcon  
President

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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. 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 MY POSITION AS REGISTERED AGENT



Veronica Alarcon  
President/Registered Agent

March 24, 1997