LAZARUS CORPORATE INDUSTRIES, INC. Requestor's Name 890 S.W. 87 AVENUE, SUITE: 16 MIAMI, FLORIDA 33174 (305)552-5973 City/State/Zip Phone # Office Use Only LOCAL REPRESENTATIVE TALLAHASSEE CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): STAFFING CO
(Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time ______ Certified Copy Certificate of Status Mail out Will wait Photocopy NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger 122 mm OTHER FILINGS REGISTRATION/ MOUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark MAD 0 4 1007 Other

Examiner's Initials

CR2E031(1/95)



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:

ARTICLE II PRINCIPAL OFFICE

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

ARTICLE III SHARES

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:

AIDA ALEMAN 5001 S. W. 100 CT MIAMI, FL 33165

ARTICLE V INCORPORATOR(S)

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

AIDA ALEMAN 5001 S. W 100 ct MIAMI FL 33165

ARTICLE VI DIRECTOR(S)

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

AIDA ALEMAN 5001 S. W 100 CT MIAMI FL 33165

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

25 day of <u>March</u>, 1997.

Chila Cleman Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35

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: A A STAFFING	CO		
2.	The name and address of the registered agent and office is:	Es:	97	 -
	AIDA ALEMAN (NAME)	<u> </u>	7	
	(NAMÉ)	<u> </u>	荛	1
	5001 S. W 100 CT (P.O. BOX NOT ACCEPTABLE)		26	
	(P.O. BOX <u>NOT</u> ACCEPTABLE)		일	0
	MIAMI FL 35165	LORID	ယ္ <u>ဝ</u>	
	(CITY/STATE/ZIP)	Þ	Φ.	

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 Juda Cleman

DATE Bor 25-97