INDUSTRIES, ·LAZARUS CORPORATE FILED Requestor's Name 97 APR 21 PM 2: 09 890 S.W. 87 AVENUE, SUITE: 16 Address THE STATE OF STATE MIAMI, FLORIDA 33174 (305)552-5973 City/State/Zip Office Use Only LOCAL REPRESENTATIVE TALLAHASSEE CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): INTELLIGENCE (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) 100002146391--3 -04/17/97--01065--013 Certified Copy 2.50 \*\*\*\*122.50 Pick up time 2,00 Walk in Will wait Certificate of Status Mail out **□** Photocopy NEW FILINGS AMENDMENTS **Profit** Amendment **NonProfit** Resignation of R.A., Officer/Director **Limited Liability** Change of Registered Agent Dissolution/Withdrawal **Domestication** Other Merger OTHERFILINGS **EVOUALIFICATIO** Annual Report Foreign Fictitious Name **Limited Partnership** Name Reservation Reinstatement W97-8988 Trademark K.P. APR 17 1997

K.R. APR, 2 1 1997

Examiner's Initials

Other



April 17, 1997

LAZARUS CORPORATE INDUSTRIES, INC. 890 S.W. 87TH AVENUE SUITE 16 MIAMI, FL 33174

SUBJECT: NATURAL HERBS CORP. Ref. Number: W97000008988

We have received your document for NATURAL HERBS CORP. 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) 487-6932.

Kimberly Rolfe Document Specialist

Letter Number: 697A00019578

# ARTICLES OF INCORPORATION FILED SECRETARIA PH 2: 09

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:

NATURAL INTELLIGENCE CORP.

#### ARTICLE II PRINCIPAL OFFICE

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

1817 SW 107 Avenue, Suite 1808 Miami, FLA 33165

#### ARTICLE III SHARES

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

100 (One Hundred)

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Pedro Corzo 1817 SW 107 Avenue, Suite 1808 Miami, FLA 33165

## ARTICLE V INCORPORATOR(S)

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

Pedro Corzo 1817 SW 107 Avenue, Suite 1808 Miami, FLA 33165

### ARTICLE VI DIRECTOR(S)

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

Pedro Corzo 1817 SW 107 Avenue, Suite 1808 Miami, Fla 33165

The undersigned incorporator(s)	has(have) exec	uted these Article	es of Incorporation thi	s
16 day of	April	, 19 <u>97</u>		
	10	Signature	<del></del>	
	·	Signature		
		Signature .	<del></del>	

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: NATURAL INTELLIGENCE CORP.	
		·
2.	The name and address of the registered agent and office is:	
	Pedro Corzo	
	(NAME)	·
	1817 SW 107 Avenue , Suite 1808, Miami, FLA 33165	SEC 97
	(P.O. BOX <u>NOT</u> ACCEPTABLE)	PR F
	Miami. FLA 33165	21
	(CITY/STATE/ZIP)	## 2:
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	HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCI PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLAC	EPT SERVICE OF DESIGNATED

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 \_\_\_April 16, 1997