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LAZARUS CORPORATE INDUSTRIES, INC. FILED Requestor's Name 97 APR 23 AM 8:17 SECRETARY OF STATE TALLAHASSEE, FLORIDA 890 S.W. 87 AVENUE, SUITE: 16 Address MIAMI, FLORIDA 33174 (305)552-5973 City/State/Zip Office Use Only LOCAL REPRESENTATIVE TALLAHASSEE CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): FURNITURE AND ACCESORIES
(Document #)

INC. (Corporation Name) (Document #) Pro (Document #) (Corporation Name) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Mail out Will wait Certificate of Status → Photocopy NEW FILINGS AMENDMENTS A STATE **Profit** Amendment DIVISION OF CORPORATION RECEVED 97 APR 23 PM 3: 00 NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent **Domestication** Dissolution/Withdrawal Other Merger (Oppital Ballance) Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other K.R. APR 2 4 1997

CR2E031(1/95)

Examiner's Initials

ARTICLES OF INCORPORATION



ARTICLE 1-NAME

The name of the Corporation is OPTIONS FURNITURE AND ACCESSORIES INC.

ARTICLE 2-PURPOSE OF CORPORATION

The Corporation shall engage in any activity of business permitted under the laws of the United States and of the State of Florida.

ARTICLE 3-PRINCIPAL OFFICE

The address of the principal office of this Corporation is:

2520 W 74 ST HIALEAH, FLORIDA 33012,

ARTICLE 4-INCORPORATOR

The name and street address of the incorporator of this Corporation is:

FIDEL ROMAN 11610 NW 4 LANE MIAMI, FL 33172

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

 $\frac{1}{\sqrt{2}} \operatorname{day of} \frac{\sqrt{2}}{\sqrt{2}} \frac{\sqrt{2}}$

ARTICLE 5- OFFICERS

The officers of the Corporation shall be:

President: RODOLFO GONZALEZ

7639 NW 3 ST MIAMI, FL 33126

Vice-President:

: ALEJANDRO BLANCO 2520 W 74 ST HIALEAH, FL 33012

Secretary:

FIDEL ROMAN

11610NW 4 LANE MIAMI, FL 33172

ARTICLE 6-DIRECTOR(S)

The Director(s) of the Corporation shall be:

RODOLFO GONZALEZ ALEJANDRO BLANCO

ARTICLE 7-SHARES

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

100 SHARES AT \$ 1.00 PAR VALUE

ARTICLE 8-REGISTERED OWNERS

The Corporation, to the extent permitted by law, shall be entitled to treat the person in whose name any share or right is registered on the books if the Corporation as the owner thereto, for all purposes, and except as may be agreed in writing by the Corporation, the Corporation shall not be bound to recognize any equitable or other claim to, or interest in, such share or right on the part of any other person, whether or not the Corporation shall have notice thereof.

ARTICLE 9-EFFECTIVE DATE

These Articles of Incorporation shall be effective immediately upon approval of the Secretary of State, State of Florida.

ARTICLE 10-AMENDMENT

The Corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation, or in any amendment hereto, or to add any provision to these Articles of Incorporation or to any amendment hereto, in any manner now or hereafter prescribed or permitted by the provisions of any applicable statute of the State of Florida, and all

rights conferred upon shareholders in these Articles of Incorporation or any amendment hereto are granted subject to this reservation.

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:

OPTIONS FURNITURE AND ACCESORIES INC.

2. The name and address of the registered agent and office is:

FIDEL ROMAN 11610 NW 4 LANE MIAMI, FL 33172

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

DATE

97 APR 23 AM 8: SECRETARY OF STA