P97000037605

LAZARUS CORPORATE INDUSTRIES, LLC
Requestor's Name

[illegible] AVENUE, SUITE 216
Address

MIAMI, FLORIDA 33174 (305)552-5973
City/State/Zip Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

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

1. ~~LAVIC AND ASSOCIATES, INC~~
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. Providence Insurance Company, Inc.
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

400002156274--5
-04/28/97--01029--022
*****78.75 *****78.75

FILED
97 APR 28 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

☒ Walk in ☒ Pick up time 2:00 ☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certificate of Status

	NEW FILINGS
X	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

RECEIVED
97 APR 28 AM 11:25

Examiner's Initials	

CR2E031(1/95)

ARTICLES OF INCORPORATION

FILED
97 APR 28 PM 2:56
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: PROVIDENCE INSURANCE COMPANY, INC.

ARTICLE II PRINCIPAL OFFICE

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

2220 S.W. 100 AVENUE
MIAMI, FL. 33165

ARTICLE III SHARES

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

SHARES:100 PAR VALUE:$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RODOLFO LANG
2220 S.W. 100 AVENUE
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):

RODOLFO LANG
LISAMARA LANG
2220 S.W. 100 AVENUE
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):

RODOLFO LANG
LISAMARA LANG
2220 S.W. 100 AVENUE
MIAMI, FL 33165

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 24 day of APRIL, 1997.

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:

PROVIDENCE INSURANCE COMPANY, INC.

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

RODOLFO LANG
(NAME)

2220 S.W. 100 AVENUE
(P.O. BOX NOT ACCEPTABLE)

MIAMI, FL 33165
(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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 4/24/97

REGISTERED AGENT FILING FEE: $35.00