FILED LAZARUS CORPORATE INDUSTRIES, INC. Requestor's Name 97 MAY 20 PH 3: 49 890 S.W. 87 AVENUE, SUITE: 16 Address 400002182534--0 -05/19/97--01032--026 \*\*\*\*122.50 \*\*\*\*122.50 MIAMI, FLORIDA 33174 (305)552-5973 City/State/Zip Phone # Office Use Only LOCAL REPRESENTATIVE TALLAHASSEE CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): ROOF, (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time \_\_\_\_\_\_\_ Certified Copy Mail out Photocopy Certificate of Status Will wait NEW TURIES AMENDMENTS 2 Profit Amendment IDITATION OF SURFAME **NonProfit** Resignation of R.A., Officer/ Director **Limited Liability** Change of Registered Agent **Domestication** Dissolution/Withdrawal Other Merger CHILITATIONS **Annual Report** Foreign Fictitious Name

Limited Partnership

Reinstatement Trademark

Other

K.M. MAY 1 9 1997 M97-11412

Examiner's Initials	•	

Name Reservation



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

May 19, 1997

LAZARUS CORPORATE INDUSTRIES, INC. 890 SW 87 AVE SUITE 16 MIAMI, FL 33174

SUBJECT: BAY, CORP.

Ref. Number: W97000011612

We have received your document for BAY, 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 ng of your document, please call
Signature Signature
Letter Number: 797A00026751

### ARTICLES OF INCORPORATION.

BAY ROOF, CORP.

The undersigned incorpator(s), for the purpose of forming a corporation under the Florida Buisness Corporation Act, herby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

BAY ROOF, CORP.

#### ARTICLE II PRINCIPAL OFFICE

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

1320 N.W. 118 ST STE. B MIAMI, FL 33167

#### 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: WALTER FRANCIS
1320 N.W. 118 ST
MIAMI, FL 33167

## ARTICLE V INCORPORATOR(S)

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

WALTER FRANCIS

1320 N.W. 118 ST MIAMI, FL 33167

Articles of Incorpation Filing Fee - \$35.00

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/ REGISTERED OFFICE

PURSUANT OT THE PROVISIONS OF SECTION 607.0501 of 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: BAY ROOF, CORP.
- 2. The name and address of the registered agent and office is:

WALTER :	<b>FRANCIS</b>	
(Name)		

1320 N.W. 118 ST (P.O.Box not acceptable)

> MIAMI, FL 33167 (City/State/Zip)

97 MAY 20 PH 3: 49
SEOFE FALL CONSTATE
ALL LET CONTROL

Having been named as registere agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity, I futher agree to comply with the provisions of all statutes relatin 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)

DIVISION OF CORPORATIONS, P.O.BOX 6327, TALLAHASSEE, FL 32314