

P97000045264

LAZARUS CORPORATE INDUSTRIES, INC.

Requestor's Name

890 S.W. 87 AVENUE, SUITE: 16

Address

MIAMI, FLORIDA 33174 (305)552-5973

City/State/Zip

Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

300002186633--7

-05/21/97--01062--013

****122.50 ****122.50

Office Use Only

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

1. HOGAR CRISTIANO MIS ABUELITOS, INC.

(Corporation Name)

(Document #)

2. Translation: My Grandparents Christian House, in

(Corporation Name)

(Document #)

3. _____

(Corporation Name)

(Document #)

4. _____

(Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
97 MAY 21 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

97 MAY 21 11:09
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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:

HOGAR CRISTIANO MIS ABUELITOS, INC

ARTICLE II PRINCIPAL OFFICE

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

5101 S.W. 112 PL
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:

100 SHARES OF STOCK AT \$1 PER VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARIANO GONZALEZ
5101 S.W. 112 PL
MIAMI, FL 33165

FILED
97 MAY 21 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

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

MARIANO GONZALEZ
5101 S.W. 112 PL
MIAMI, FL 33165

MARIA NORELLYS GONZALEZ
5101 S.W. 112 PL
MIAMI, FL 33165

DIANA GONZALEZ
5101 S.W. 112 PL
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):

PRESIDENT
TREASURE

MARIANO GONZALEZ

5101 S.W. 112 P1
MIAMI, FL 33165

VICE-PRESIDENT
SECRETARY

MARIA NORELLYS GONZALEZ

5101 S.W. 112 P1
MIAMI, FL 33165

DIRECTOR

DIANA GONZALEZ

5101 S.W. 112 PL
MIAMI, FL 33165

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this _____ day of _____, 19____.

Mariano Gonzalez
Signature

Ma. Norelly Gonzalez
Signature

Diana Gonzalez
Signature

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: HOGAR CRISTIANO MIS ABUELITOS, INC
2. The name and address of the registered agent and office is:
MARIANO GONZALEZ
(NAME)
5101 S.W. 112 PL
(P.O. BOX NOT ACCEPTABLE)
MIAMI, FL 33165
(CITY/STATE/ZIP)

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

Mariano Gonzales

DATE

REGISTERED AGENT FILING FEE: \$35.00

FILED
97 MAY 21 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA