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P97000070162

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

FILED  
97 AUG 13 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Office Use Only

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

1. MERLYN'S DREAMS ENTERPRISE CORPORATION  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_ 100002265931--1  
(Corporation Name) (Document #) 08/13/97 01088-011  
\*\*\*\*122.50 \*\*\*\*122.50
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

RECEIVED  
97 AUG 13 AM 11:50  
DIVISION OF CORPORATION

## 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.*

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### ARTICLE I NAME

The name of the corporation shall be:

**MERLYN'S** Dreams ENTERPRISE CORPORATION

### ARTICLE II PRINCIPAL OFFICE

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

**1570 NW 128 DR #203  
SUNRISE FL 33323**

### ARTICLE III SHARES

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

**100 X \$10.00 = \$1,000.00**

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**LINELBA GUERREIRO VILLALOBOS  
1570 NW 128 DR #203  
SUNRISE FL 33323**

**ARTICLE V INCORPORATOR(S)**

See instructions for officers/directors

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

**YAJAIRA VILLALOBOS**  
**(PRESIDENT)**  
**1570 NW 128 DR #203**  
**SUNRISE FL 33323**  
**70 SHARES**

**LINELBA GUERREIRO VILLALOBOS**  
**(TREASURER)**  
**1570 NW 128 DR #203**  
**SUNRISE FL 33323**  
**20 SHARES**

**JANETH TERESA CORTES**  
**(SECRETARY)**  
**2738 MONROE STREET**  
**HOLLYWOOD FL 33030**  
**10 SHARES**

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

**30** **JUNE** **97**  
\_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
YAJAIRA VILLALOBOS Signature

  
\_\_\_\_\_  
LINELBA GUERREIRO VILLALOBOS Signature

  
\_\_\_\_\_  
JANETH TERESA CORTES Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

*MERLYN'S DREAMS ENTERPRISE CORPORATION*

1. The name of the corporation is \_\_\_\_\_  
\_\_\_\_\_

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

**LINELBA GUERREIRO VILLALOBOS**

(NAME)

**1570 NW 128 DR #203**

(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

**SUNRISE, FL 33323**

(CITY/STATE/ZIP)

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*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)

*June 30, 1997*  
(DATE)