

**P9700082266**

HAZARDUS PROPERTY INVESTMENTS INC.  
 Requester's Name  
 890 S.W. 87 AVENUE, SUITE: 16  
 Address  
 MIAMI, FLORIDA 33174 (305)552-5973  
 City/State/Zip Phone #

100002301161--1  
 -09/23/97--01059--028  
 \*\*\*\*\*78.75 \*\*\*\*\*78.75  
 Office Use Only

LOCAL REPRESENTATIVE TALLAHASSEE

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

1. OLA BEDDING & FURNITURE, INC.  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (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

97 SEP 23 PM 11:13  
 OFFICE OF CORPORATION

9/23

FILED  
97 SEP 23 PM 12:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE OF INCORPORATION  
OF  
OLA BEDDING & FURNITURE, INC

ARTICLE I- THE NAME OF THE CORPORATION SHALL BE:  
OLA BEDDING & FURNITURE, INC

ARTICLE II NATURE OF BUSINESS: The Corporation may engage in any activity or business permitted under the law of THE STATE OF FLORIDA AND OF THE UNITED STATE OF AMERICA.MOSTLY FURNITURE ALL KIND.

ARTICLE III AUTHORIZED CAPITAL STOCK:  
The maximum numbers of share of stock that this corporation is authorized to have outstanding is FIVE HUNDRED SHARE (500) HAVING A PAR VALUE OF \$1.00 ( ONE DOLLAR ) PER SHARE.

IV INITIAL CAPITAL:  
The initial capital with which this Corporation will begin business is FIVE HUNDRED DOLLARS ( \$500 ).

ARTICLE V - OTHERS

THE CAPITAL STOCK OF THIS CORPORATION SHALL BE ISSUED PURSUANT TO A PLAN UNDER SECTION 1244 OF THE INTERNAL REVENUE CODE. AND SUBSEQUENT CHANGES AND MODIFICATIONS . ALL OF THE STOCKS AND 'SECURITIES IN LIEU OF CASH OR AT JUST VALUATION TO BE DETERMINE BY THE BOARD OF DIRECTORS.

ARTICLE VI - TERM OF EXISTENCE

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE.

ARTICLE VII INITIAL ADDRESS

THE INITIAL STREET ADDRESS IN THIS STATE OF THE PRINCIPAL OFFICE OF THE CORPORATION SHALL BE:120 S.W. 55 AVE. MIAMI FL. 33015.

ARTICLE VIII - DIRECTORS

THE NUMBERS OF DIRECTORS OF THIS CORPORATION SHALL BE NO LESS THAN ONE.  
THE NAME AND STREET ADDRESS (ES) OF EACH MEMBER OF THE FIRST BOARD OF DIRECTORS ARE AS FOLLOWS:

NAME	ADDRESS
OLGA ALVAREZ	120 S.W. 55 AVE. MIAMI FL 33134.

ARTICLE IX -SUSCRIBER (S)

THE NAME AND STREET ADDRESS OF EACH PERSON SIGNING THIS ARTICLES OF INCORPORATION AS A SUBSCRIBER ARE AS FOLLOWS.

OLGA ALVAREZ 120 S.W. 55 AVE MIAMI FL 33134

ARTICLE X - RESIDENT AGENT

THE NAME OF THE RESIDENT AGENT OF THIS CORPORATION AND THE STREET ADDRESS OF THE PLACE OF BUSINESS LOCATION FOR SERVICE PROCESS WITHIN THIS STATE IS: OLGA ALVAREZ-120 S.W. 55 AVE MIAMI FL

THE SAID RESIDENT AGENT SHALL SERVE UNTIL HIS SUCESSOR IS DESIGNATED BY THE BOARD OF DIRECTORS OF THE CORPORATION.

THE SAID RESIDENTE AGENT, ACCEPT THIS DESIGNATION AS RESIDENT AGENT AS EVIDENCE OF SIGNATURE BELOW, AND AGREE TO COMPLY WITH THE PROVISIONS OF CHAPTER 48.091, FS, RELATIVE TO ACCEPTING THIS OFFICE.

HAVING BEIN NAMED AS REGISTERED AGENT FOR THE ABOVE CORPORATION AT THE PLACE DESIGNATED.

I HEREBY ACCEPT THE APPOINTMENT AS REGISTER AGENT AND AGREE TO ACT IN THIS CAPACITY, BY SIGNING THIS DOCUMENT.

  
OLGA, ALVAREZ

IN WITNESS WHEREOF, THE UNDERSIGNED (S) SUBSCRIBER (S)  
INCORPORATOR (S); HEREBY MAKE, SUBSCRIBE, ACKNOWLEDGE, AND  
CERTIFY THAT THE FOREGOING ARTICLES OF INCORPORATION ARE TRUE  
AND CORRECT AND HAVE HERE UNTO SET OUR HAND {S} AND SEAL  
THIS Sept 22 1997

*Olga Alvarez*  
OLGA ALVAREZ

STATE OF FLORIDA  
COUNTY OF DADE, SS

BEFORE ME, THIS DAY PERSONALLY APPEARED:

OLGA ALVAREZ

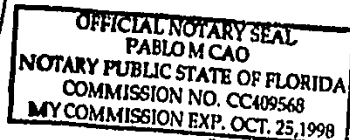
KNOWN TO ME TO BE THE PERSON (S) DESCRIBED IN, AND WHO  
EXECUTED THE FOREGOING CERTIFICATE OF INCORPORATION AND  
ACKNOWLEDGE BEFORE ME ; THAT HE (THEY) EXECUTED SAME  
FREELY AND VOLUNTARILY FOR THE PURPOSE HEREIN STATED.

WITNESS MY HAND AND OFFICIAL SEAL AT;

MIAMI, DADE COUNTY, FLORIDA, THIS 22 OF Sept 1997

NOTARY PUBLIC OF THE STATE  
OF FLORIDA, AT LARGE

MY COMMISSION EXPIRES:



FILED  
97 SEP 23 PM 12:17  
NOTARY PUBLIC STATE  
OF FLORIDA