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 97 SEP 30 PM 4:15
 STATE
 TALLAHASSEE

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

Office Use Only

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

1. LPI SERVICES, INC.
 (Corporation Name) (Document #)
2. _____
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

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- 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 30 PM 4:17
 STATE
 TALLAHASSEE

Examiner's Initials	
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ARTICLES OF INCORPORATION

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97 SEP 30 PM 4:15
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:

LPI SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

5201 BLUE LAGOON DRIVE, SUITE 530
MIAMI, FLORIDA 33126

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RAUL VICTOR LEYVA
13344 SW 1 TERRACE
MIAMI, FLORIDA 33126

ARTICLE V INCORPORATOR(S)

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

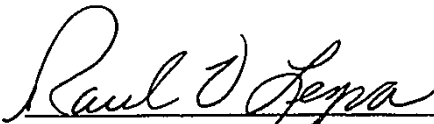
MIGUEL A. RODRIGUEZ 4660 SW 15 ST. MIAMI, FL 33134
RAUL V. LEYVA 13344 SW 1 TERRACE, MIAMI, FL 33184
BRENDA M. LEVY 15634 NW 12th COURT, PEMBROKE PINES 33028

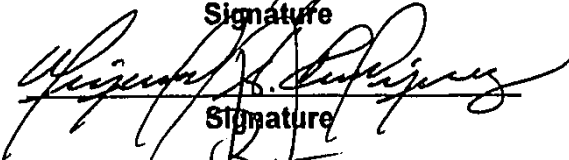
ARTICLE VI DIRECTOR(S)


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

RAUL V. LEYVA 13344 SW 1 TERRACE, MIAMI, FL 33184
MIGUEL A. RODRIGUEZ 4660 SW 15 ST. MIAMI, FL 33134
BRENDA M. LEVY 15634 NW 12th COURT, PEMBROKE PINES 33028

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



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: LPI SERVICES, INC.

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

RAUL V. LEYVA

(NAME)

13344 SW 1 TERRACE

(P.O. BOX NOT ACCEPTABLE)

MIAMI, FL 33126

(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

Raul V. Leyva

DATE _____

REGISTERED AGENT FILING FEE: \$35.00

FILED
97 SEP 30 PM 4: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA