

LAZARUS CORPORATE INDUSTRIES, INC.

Requestor's Name

89 S. BAYVIEW, SUITE 16

Address

MIAMI, FLORIDA 33144-0552

City/State/Zip Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

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

1. NEUVOX PRODUCTIONS 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

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-10/15/97--01057--018  
\*\*\*\*122.50 \*\*\*\*122.50

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 OCT 15 AM 10:47  
DIVISION OF CORPORATION

Examiner's Initials

# 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:

NEUVOX PRODUCTIONS INC.

FILED  
97 OCT 15 AM 11:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

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

7123 S. W. 115 Place, Suite A  
Miami, Florida. 33173

## ARTICLE III SHARES

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

Five Hundred Shares  
(500)

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ARTHUR NOBO  
7123 S. W. 115 Place, Suite A  
Miami, Florida. 33173

ARTICLE V. INCORPORATOR(S)

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

ARTHUR NOBO

7123 S. W. 115 Place Suite A

Miami, Florida. 33173

ARTICLE VI DIRECTOR(S)

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


Arthur Nobo, President, Vice President, Treasurer, Secretary.

7123 S. W. 115 Place, Miami, Florida. 33173

Suite A

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

15th day of September, 19 97.

x 

Signature

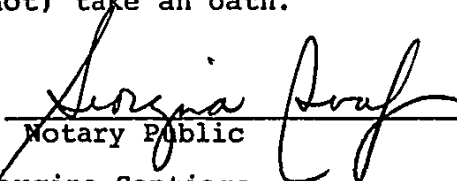
Arthur Nobo,

Signature

Signature

STATE OF FLORIDA )  
COUNTY OF DADE )

The foregoing instrument was acknowledged before me this  
15th day of September, 1997 by Arthur Nohio  
who is personally known to me or who has produced personally known  
as Identification and who did (did not) take an oath.

  
Notary Public  
Georgina Santiago  
Typed or Printed Name of Notary

STATE OF FLORIDA )  
COUNTY OF DADE )



The foregoing instrument was acknowledged before me this  
\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_ by  
who is personally known to me or who has produced \_\_\_\_\_  
as Identification and who did (did not) take an oath.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Typed or Printed Name of Notary.

My commission expires on:  
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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: NEUVOK PRODUCTIONS INC.

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

Mr. Arthur Nobo

(NAME)

7123 S. W. 115 Place, Suite A

(P.O. BOX NOT ACCEPTABLE)

Miami, Florida 33171

(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 Arthur Nobo

DATE September 15, 1997

97 OCT 15 AM 11:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA