

797000097424
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. LU-LU PET SHOP CORPORATION
(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	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

600002347356--8
-11/14/97--01044--020
*****78.75 *****78.75

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

NOTICE TO CORP DIVISION

NOV 14 AM 11:09

RECEIVED

ARTICLES OF INCORPORATION

of

*****LU-LU PET SHOP, CORPORATION*****
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

*****LU-LU PET SHOP, CORPORATION*****

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue ONE HUNDRED shares (100) of N/V Dollar(s) (\$ -0-) par. value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	LEONOR LEIGHTON
ADDRESS	84 N.E. 29 Street
CITY	MIAMI, FLORIDA
ZIP	33137

The principal office, if known, or the mailing address of the corporation is:

NAME	LEONOR LEIGHTON
ADDRESS	84 N.E. 29 Street
CITY	MIAMI, FLORIDA
ZIP	33137

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (-2-) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	LEONOR LEIGHTON
ADDRESS	84 N.E. 29 Street
CITY	MIAMI
STATE	FLORIDA
ZIP	33137
NAME	DALE LEIGHTON
ADDRESS	84 N.E. 29 Street
CITY	MIAMI
STATE	FLORIDA
ZIP	33137
NAME	
ADDRESS	
CITY	
STATE	
ZIP	

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	LEONOR LEIGHTON		
ADDRESS	84 N.E. 29 St.		
CITY	Miami,	STATE	FL. ZIP 33137
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 12 day of November, 19 97

✓ Leonor Leighton. (Seal)

____ (Seal)

____ (Seal)

STATE OF FLORIDA)

COUNTY OF DADE)

SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

Leonor Leighton.
Signature

Form of Identification

Signature

Form of Identification

Signature

Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that SHE executed these Articles of Incorporation, that I relied upon the form of identification of the above named person as indicated opposite each name, and that an oath was not taken.

NOTARY PUBLIC SEAL



Witness my hand and official seal in the County and State last aforesaid this 12th day of November, 19 97

Notary Signature

Printed Notary Signature

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

*****LU-LU PET SHOP, CORPORATION*****

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 84 N.E. 29 St. Miami, Florida 33137

has named LEONOR LEIGHTON

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.

Leonor Leighton
(registered agent)

FILED
97 NOV 14 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA