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OFFICE USE ONLY (Document #)			
LAZARUS CORPORATE FILING SEI (Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5 (City, State, Zip) (Phon	5973 e #)	3(DOOO24620535 -03/19/9801054013 ****122.50 ****122.50
LOCAL REPRESENTATIVE TALLAHA	ISSEE	OFFICE USE ONLY	
CORPORATION NAME(S) & D	OCUMENT NUM	BER(S) (if known):	
1. SAZMV EN	TERPRIS	ES, ///C	2
2.		(Document #)	
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Walk in Pick up time Mail out Will wait	2.00 Photocopy	(Document #) Certified C	SSE SO I
NEW FILINGS	AMENDM Amendment	ENIS	P S
NonProfit		R.A., Officer/Director	10 MW 86
. Limited Liability	Change of Regis	tered Agent	
Domestication	Dissolution/With	drawal	
Other	Merger		
OTHER FILNGS Annual Report Fictitious Name Name Reservation MAR 1 9 1998 W9 8 -6/8 2	REGISTRATIO QUALIFICATIO Foreign Limited Partners Reinstatement Trademark	hip $\mathcal{J}_{\mathcal{J}}^{\gamma}$	OF CURPORATION OF SURPORATION OF SUR
- 010 6	Other		Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 19, 1998

LAZARUS

MIAMI, FL

SUBJECT: SAZMYUN ENTERPRISES, INC.

Ref. Number: W98000006182

We have received your document for SAZMYUN ENTERPRISES, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated in your document is not an active entity according to our records. Please reinstate this entity (call (850) 487-6059 for information) or designate another entity that is active according to our records.

WE NEED THE TITLE OF THE PERSON SIGNING ON BEHALF OF THE REGISTERED AGENT.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6932.

Kimberly Rolfe Document Specialist

Letter Number: 298A00014950

ARTICLES OF INCORPORATION

98 MAR 20 PM 3: 21

SECRETARY OF STATE The undersigned incorporator(s), for the purpose of forming a corporation under the EE. FLORIDA Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

SAZMYN ENTERPRISES. INC.

ARTICLE II PRINCIPAL OFFICE

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

4744 N. W. 167 Street. MIAMI, FLORIDA, 33614.

ARTICLE III SHARES

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

1000 SHARES.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

APDUL MALIK CHUNARA 4744 N. W. 167 St. MIAMI, FL. 33014.

ARTICLE V INCORPORATOR(S)

2201440

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

> ABDUL HAMEED CHUNARA. 4744 N.W. 167 St. MIAMI, FL. 33014.

ARTICLE VI DIRECTOR(S)

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

- (PRESIDENT) 1. ABDUL MAMEED CHUNARA. A-3 UNITED HOUSUNG SOCIETY, 96 FLYNN STREET, GARDEN EAST, KARACHI, PAKISTAN.
- 2. SALMA CHUNARA. ++SECRETARY) A_3 UNITED HOUSING SOCIETY. GARDEN EAST, KARACHI. PAKIATAN.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this EIGHTEEN day of MARCH , 19 18

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.

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1.	The name of the corporation is: SAZMYN ENTERPRISES INC.
2.	The name and address of the registered agent and office is: ABDUL MALIE CHUNARA (NAME)
	(P.O. BOX NOT ACCEPTABLE)
	4744 N.W. 167 Street. MIAMI, FL. 33014. (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 RECISTERED 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

DATE____3-18-98.

REGISTERED AGENT FILING FEE: \$35.00