OFFICE USE ONLY (Document #)	43299
LAZARUS CORPORATE FILING SERVICE, INC. (Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #) LOCAL REPRESENTATIVE TALLAHASSEE	4000025835943 -07/15/9801028020 -07/15/9801028020 *****70.00 ******70.00
CORPORATION NAME(s) & DOCUMENT NUME 1. LOPEZ and Composition Name 2. (Corporation Name) 3. (Corporation Name) 4. (Corporation Name) Walk in Pick up time 2.00 Mail out Will wait Photocopy	(Document #) (Document #) (Document #) (Document #) (Document #) (Consider a consideration of the considerati
Profit NonProfit NonProfit Limited Liability Domestication Other OTHER FILNGS Annual Report Fictitious Name Name Reservation Name Reservation Name Reservation Amendment Resignation of R Change of Registe Dissolution/Withd Merger REGISTRATION QUALIFICATION Foreign Unnited Partnersh Reinstatement Trademark Other	A., Officer/Director ared Agent rawal Mante, 55 Accord Ac

CR2E031(9/92)



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 15, 1998

LAZARUS

MIAMI, FL

SUBJECT: LOPEZ AND COMPANY

Ref. Number: W98000016084

We have received your document for LOPEZ AND COMPANY. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 598A00037667

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:

LOPEZ AND LOPEZ Company

98 JUL 16 PM 3: 19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are): ILDAE. LOPER 8870 FOUNTAINEBLEAU BUD. #310 MIAMI, FL, 32172
ARTICLE VI DIRECTOR(S)
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):
ILDA E. LOPEZ DIRECTOR AND PRECIDENT 8870 FOUNTAINE BLEAU BLUDI.#310 MIAMI, PL 33172
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this day of コペレソ, 19_9分.
Signature

Articles of Incorporation Filing Fee - \$35

Signature

Signature

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.

The name of the corporation is:	LOPEZ	AND LOPEZ	Compan	4
				<u>ب</u> .
The name and address of the regi	istered ag	ent and offic	e is:	
ILDA. E	ا ما	F87		
(NA	AME)			
8870 foi	MATAIN	E BLEAU	BLUD.	#310
(P.O. BOX <u>NO</u>	T ACCEPT	TABLE)		
MIAMI	,FC.	3317	7	
(CITY/S	TATE/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.

SIGNATUR	= Alleta		TASE	99	
DATE	7/13/98	•	CRETAI LAHAS		
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			TATE ORIDA	3: [9	

REGISTERED AGENT FILING FEE: \$35.00