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LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

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MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

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OFFICE USE ONLY

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

1. Solymar Funeral Services, Corp.  
(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

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

FILED  
98 AUG 13 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

RECEIVED  
98 AUG 13 AM 11:01  
DIVISION OF CORPORATION

Examiner's Initials

***ARTICLES OF INCORPORATION***

***OF***

***Solymar Funeral Services, Corp.***

**FILED**  
98 AUG 13 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned, being an individual, does hereby act as incorporator in adopting the following Articles of Incorporation for the purpose of organizing a corporation for profit, pursuant to the provisions of the Florida Business Corporation Act.

***ARTICLE I***

The corporate name for the corporation (hereinafter referred as to the "corporation") is:  
  
SOLYMAR FUNERAL SERVICES, CORP.

***ARTICLE II***

The street address and mailing address wherever located, of the principal office of the corporation is:

999 Brickell Bay Drive  
Suite 301  
Miami, Florida 33131

***ARTICLE III***

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares.

***ARTICLE IV***

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

#### ***ARTICLE V***

This corporation is organized for the purpose of transacting any and all lawful business.

#### ***ARTICLE VI***


The street address of the initial registered office/principal office of this corporation is 999 Brickell Bay Drive, Suite 301 Miami, Florida 33131 and the name of the initial registered agent of this corporation at that address is MARISOL SANCHEZ.

#### ***ARTICLE VII***

The name and address of each person signing these Articles is:

NAME	ADDRESS
MARISOL SANCHEZ President	999 Brickell Bay Dr. Suite 301 Miami, FL 33131

The undersigned incorporations have executed these Articles of Incorporation, this 10<sup>th</sup> day of August, 1998.

  
Marisol Sanchez  
President

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

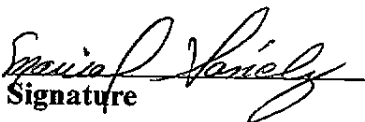
1. The name of the corporation is:

**Solymer Funeral Services, Corp.**

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

**Marisol Sanchez  
999 Brickell Bay Drive  
Suite 301  
Miami, Florida 33131**

*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 registered agent.*

  
Signature

8 - 12 - 98  
Date

**FILED**  
98 AUG 13 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA