

*PROCEED 73795*

OFFICE USE ONLY (Document #)

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

400002622754--2  
-08/24/98--01040--004  
\*\*\*\*122.50 \*\*\*\*122.50

OFFICE USE ONLY

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

1. SPiRiT OF MIAMI (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

FILED  
 98 AUG 24 PM 12:59  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

- 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

*8/24*

RECEIVED  
 98 AUG 24 AM 10:28  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

Examiner's Initials

FILED

98 AUG 24 PM 12:59

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## 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:

SPIRIT OF MIAMI, *INC.*

### ARTICLE II PRINCIPAL OFFICE

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

220 71st Street - suite 213

Miami Beach, FL 33141

### ARTICLE III SHARES

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

3 shares of no par value

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

UGO V. CHIARATO, C.P.A.  
220 71ST STREET - SUITE 213  
MIAMI BEACH, FL 33141

ARTICLE V INCORPORATOR(S)

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

Dr. ALBERTO MALVISI, President/Treasurer

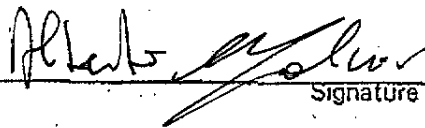
Ugo v. Chiarato, Secretary

both at 220 71st Street - suite 213

Miami Beach, Fl. 33141

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

20th day of AUGUST, 1998

  
Signature

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.

1. The name of the corporation is: SPRIT OF MIAMI, INC.

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

(NAME)

UGO V. CHIARATO, C.P.A.  
220 71ST STREET - SUITE 213  
MIAMI BEACH, FL 33141

(P.O. BOX NOT ACCEPTABLE)

DR. ALBERTO HALVISI

(CITY/STATE/ZIP)

PRESIDENT

AUGUST 20, 1998

*Alberto Halvisi*

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.

*Ugo V Chiarato*

UGO V. CHIARATO, C.P.A.  
220 71ST STREET - SUITE 213  
MIAMI BEACH, FL 33141

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**FILED**  
98 AUG 24 PM 12:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA