

OFFICE USE ONL (D. ume L#)	
LAZARUS CORPORATE FILING SERVICE, INC.	
(Requestor's Name)	
3320 S.W. 87th AVENUE	5000026313259
(Address)	5000026313259 -09/02/3801059030 ****122.50 ****122.50
MIAMI, FLORIDA (305)552-5973	*****122.5U *****122.50
(City, State, Zip) (Phone #)	
LOCAL REPRESENTATIVE TALLAHASSEE	OFFICE USE ONLY
CORPORATION NAME(S) & DOCUMENT NUM	BER(S) (if known):
1. A & D CORPORATION	$\sqrt{}$
(corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3.	(Document #)
(Corporation Name)	(Document#)
4.	Vocations (*)
(Corporation Name)	(Document#)
Walk in Pick up time 2.00	Certified Copy
Mail out Will wait Photocopy	Certificate of Status  CF STATE  STAT
NEW FILINGS AMENDM	000000000000000000000000000000000000000
Profit Amendment	
NonProfit Resignation of R	R.A., Officer/Director
. Limited Liability Change of Regist	tered Agent
Domestication Dissolution/Without	drawal
Other Merger	10 6
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OTHER FILNGS REGISTRATIO QUALIFICATIO	
Annual Report ·	6 2 2 4111
Fictitious Name Foreign	
Name Reservation Limited Partnersh	ub 1/1)

Reinstatement

Examiner's Initials

Trademark

Other

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September 4, 1998

**LAZARUS** 

MIAMI, FL

SUBJECT: A & D CORPORATION Ref. Number: W98000020130

We have received your document for A & D CORPORATION. However, the document has not been filed and is being returned for the following:

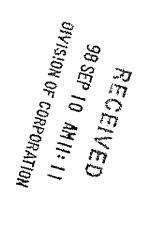
The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One 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: 498A00045269



## 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:

AL & D SERVICES CORP.

### ARTICLE II PRINCIPAL OFFICE

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

1870 Bay Drive Miami Beach, Florida 33141

### ARTICLE III SHARES

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

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Daisy Garcia 1870 Bay Drive Miami Beach, Florida 33141

### ARTICLE V INCORPORATOR(S)

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

Daisy Garcia 1870 Bay Drive Miami Beach, Florida 33141

#### ARTICLE VI DIRECTOR(S)

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

President	_	Daisy Garcia	1870 Bay Drive Miami Beach, Fla.	33141
Treasurer	-	Daisy Garcia	1870 Bay Drive Miami Beach, Fla.	33141
Secretary		Daisy Garcia	Same as Above	

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this \_\_\_\_\_\_ 1st\_\_\_ day of \_\_September\_\_\_\_\_\_, 19\_98\_.

/ •

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.

The name of the corporation is	AL & D SERVICES CORP.
The name and address of the re	egistered agent and office is:
Daisy garcia	
	(NAME)
1870 Bay Drive	
· · · · · · · · · · · · · · · · · · ·	NOT ACCEPTABLE)
Miami Beach, Fla.	331 <i>1</i> 1
	//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 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.

SIGNATURE\_

DATE

08-31-9

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9: 50

**REGISTERED AGENT FILING FEE: \$35.00**