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LOCAL REPRESENTATIVE TALLAHASSEE

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OFFICE USE ONLY

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

1. ALPHA-LIFE INC.

(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 SEP 16 PM 1:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

RECEIVED
98 SEP 16 AM 11:29
DIVISION OF CORPORATION

9/16

Examiner's Initials

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:

ALPHA-LIFE INC.

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TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

9771 S.W. 20 STREET
MIAMI FL. 33165

ARTICLE III SHARES

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

ONE THOUSAND

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RAMON COMABELLA
9771 S.W. 20 STREET
MIAMI FL. 33165

ARTICLE V INCORPORATOR(S)

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

RAMON COMABELLA · 9771 SW 20 STREET MIAMI FL 33165
MIGUEL AMOR 1411 CORAL WAY, CORAL GABLES, FL 33134
EDUARDO MENDEZ 9930 S.W. 19 STREET MIAMI FL. 33165
AGUSTIN ACOSTA 9940 S.W. 20 STREET MIAMI FL 33165

ARTICLE VI DIRECTOR(S)

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

PRESIDENT RAMON COMABELLA 9771 S.W. 20 STREET MIAMI FL 33165
VICE PRESIDENT MIGUEL AMOR 1411 CORAL WAY, CORAL GABLES, FL 33134
TREASURER EDUARDO MENDEZ 9930 S.W. 19 STREET MIAMI FL 33165
SECRETARY AGUSTIN ACOSTA 9940 SW 20 STREET MIAMI FL 33165

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this _____ day of _____, 19____.

RAMON COMABELLA

Signature

MIGUEL AMOR

Signature

EDUARDO MENDEZ

Signature

AGUSTIN ACOSTA

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.

1. The name of the corporation is: ALPHA - LIFE INC.
2. The name and address of the registered agent and office is:
RAMON COMABELLA
(NAME)
9771 S.W. 20 STREET
(P.O. BOX NOT ACCEPTABLE)
MIAMI FL 33165
(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 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 ②

DATE 9-15-

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98 SEP 16 PM 1:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

REGISTERED AGENT FILING FEE: \$35.00