

P9800084540

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

700002653217--9

-10/01/98--01042--002

\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. CARIBBEAN ISLAND CRAFTS, 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

FILED  
98 OCT -1 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

RECEIVED  
98 OCT -1 AM 11:02  
DIVISION OF CORPORATION

Examiner's Initials

**ARTICLES OF INCORPORATION  
OF  
CARIBBEAN ISLAND CRAFTS, INC.**

**FILED**  
**98 OCT -1 PM 2:01**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act hereby adopt the following Articles of Incorporation.

**ARTICLE I NAME**

The name of this corporation shall be CARIBBEAN ISLAND CRAFTS, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be 7315 S.W. 18 Street Road, Miami, Fl. 33155.

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any time is FIVE HUNDRED (500)..

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Iraida R. Brouwer  
7315 S.W. 18 St. Rd.  
Miami, Fl. 33155

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:


Iraida R. Brouwer  
7315 S.W. 18 St. Rd.  
Miami, Fl. 33155

ARTICLE VI DIRECTORS

The name and address of the directors to these Articles of Incorporation are:

Iraida R. Brouwer  
7315 S.W. 18 St. Rd.  
Miami, Fl. 33155

The undersigned incorporator has executed these Articles of Incorporation this 30th day of September, 1998.

  
Signature

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

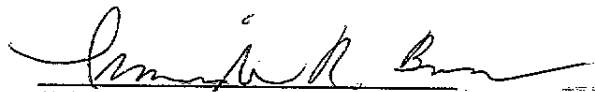
Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent in the State of Florida.

The name of the corporation is CARIBBEAN ISLAND CRAFTS, INC.

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

Iraida R. Brouwer  
7315 S.W. 18 St. Rd,  
Miami, Fl. 33155

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 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

9/30/98  
DATE

**FILED**  
98 OCT -1 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA