

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

OFFICE USE ONLY

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

1. EXPORT KAYLA INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certified Copy ☐ 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

RECEIVED  
98 OCT 16 AM 10:55  
DIVISION OF CORPORATION  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE  
98 OCT 16 PM 1:01  
FILED

300002665373--0  
-10/16/98--01046--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Examiner's Initials

ARTICLES OF INCORPORATION  
OF

EXPORT KAYLA INC.  
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ARTICLE I

THE NAME OF THE CORPORATION IS:

EXPORT KAYLA INC.  
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ARTICLE II

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE III

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THE CORPORATION IS AUTHORIZED TO ISSUE IS 1000 SHARES AT \$1.00 PER VALUE.

ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH THE CORPORATION WILL BEGIN BUSINESS IS THE SUM OF \$1000.00

ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMENCE UPON FILING.

ARTICLE VI

THE STREET ADDRESS IS THE PRINCIPAL OFFICE OF THE CORPORATION IN THIS STATE SHALL BE: --

8302 N.W. SOUTH RIVER DR. MEDLEY, FLORIDA 33166

ARTICLE VII

THE NAME(S) AND STREET ADDRESS(ES) OF THE PERSON SIGNING THESE ARTICLES ARE:

CESAR QUINTERO

8302 N.W. SOUTH RIVER DR. MEDLEY, FLORIDA 33166

ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN TWO OR MORE THAN SIX DIRECTORS. THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF ONE DIRECTORS

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ARTICLE IX

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE, AND  
THE NAME OF THE INITIAL REGISTERED AGENT AT THAT ADDRESS  
SHALL BE:

CESAR QUINTERO  
8302 N.W. SOUTH RIVER DR. MEDLEY, FLORIDA 33166

-----  
THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF  
INCORPORATION THIS THIRTEEN DAYS OCTOBER OF 1998.

CESAR QUINTERO  
INCORPORATE

  
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: EXPORT KAYLA INC.

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

NAME

8302 N.W. SOUTH RIVER DR.

(P.O. BOX NOT ACCEPTABLE)  
MEDLEY, FLORIDA 33166

(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

DATE: OCTOBER 13, 1998

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TALLAHASSEE FLORIDA