

Florida Department of State

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To:

Division of Corporations Fax Number : (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC. Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

# FLORIDA PROFIT CORPORATION OR P.A.

# LASER U.S.A., INC.

| Certificate of Status | 0       |
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| Certified Copy        | 1       |
| Page Count            | 02      |
| Estimated Charge      | \$78.75 |

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### ARTICLES OF INCORPORATION SECRETAINT OF STATE TALLAHASSEE, FLORIDA

<u>of</u>

#### LASER U.S.A., INC.

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

## ARTICLE I - NAME

The name of the corporation shall be: Laser U.S.A., Inc.

## **ARTICLE II - PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be: "Salman, 17290 N.E. 19th Avenue, North Miami Beach, FL

### ARTICLE III - CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 shares of common stock, at \$1.par value.

# ARTICLE IV - INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is: Martin H. Alman 17290 N.E. 19th Avenue, North Miami Beach, FL 33162

#### ARTICLE V - DIRECTOR(S)

The name(s) of the director(s) is(are): Ester Benor, Pres. & Sec. 10 shares 15451 W. Dixie Highway, North Miami Beach, FL

## ARTICLE VI - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: Martin H. Alman, 17290 N.E. 19th Avenue, North Miami Beach, FL 33162

The undersigned has executed these Articles of Incorporation due 20, day of November 1998

Prepared by: Martin Alman 17290 NE 19 Ave. No. Miami Beach, PL 305-944-5353

Incorporator 33162

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| CERTIFICATE                                                                                                                                | OF DESIGNATION OF                                                                                                                                           |
| REGISTERED AGE                                                                                                                             | ENT/REGISTERED OFFICE                                                                                                                                       |
| PURSUANT TO THE PROVISIONS OF<br>STATUTES, THE UNDERSIGNED CO<br>OF THE STATE OF FLORIDA, SUBM<br>NATING THE REGISTERED OFFICE<br>FLORIDA. | SECTION 607.0501 or 617.0501, FLORIDA<br>ORFORATION, ORGANIZED UNDER THE LAWS<br>ITS THE FOLLOWING STATEMENT IN DESIG-<br>REGISTERED AGENT, IN THE STATE OF |
| 1. The name of the corporation is:                                                                                                         | LASER U.S.A, INC.                                                                                                                                           |
| 2. The name and address of the reg                                                                                                         | TALL<br>198                                                                                                                                                 |

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.

(Name)

(P.O. Box not acceptable)

(City/State/Zip)

17290 N.E. 19th Avenue

North Miami Beach, FL

(Signature)

1998 20 11 (Date)

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