

OFFICE USE ONLY (Document #)

LAZERUS 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

000002726210--4  
-12/30/98--01046--010  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. QUALITY SERVICE & ASSOCIATES 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 DEC 30 PM 1:55  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

RECEIVED  
90 DEC 30 AM 11:00  
FBI - TALLAHASSEE

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:

QUALITY SERVICE & ASSOCIATES Inc.

## ARTICLE II PRINCIPAL OFFICE

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

5900 West 20th Avenue  
Hialeah, Florida 33016

## ARTICLE III SHARES

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

100 shares, all in one class \$1.00 value.

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Zilsa Perales-Mendieta  
5900 West 20th Avenue  
Hialeah, Florida 33016

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TALLAHASSEE FLORIDA

ARTICLE V INCORPORATOR(S)

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

Zilsa Perales-Mendieta PRESIDENT & TREA. 2316 W. 56th Street Hia. 33016  
Marta Acosta Rodriguez VICE-PRES. 6300 N.W. 114 Street Mia. Fl. 33012  
Rebekah Rivero SECRETARY 7846 Coral Way #439. Mia. Fl. 33155


ARTICLE VI DIRECTOR(S)

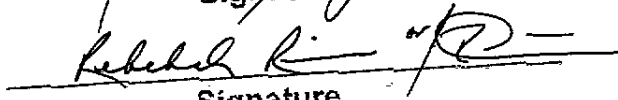
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

ZILSA PERALES-MENDIETA 2316 W. 56th Street Hialeah, Fl. 33016  
MARTA ACOSTA RODRIGUEZ 6300 N.W. 114 Street Mia. Fl. 33012  
REBEKAH RIVERO 7846 Coral Way #439 Mia. Fl. 33155

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 28th day of December, 1998.

  
Signature

  
Signature

  
Signature

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: \_\_\_\_\_  
                                    QUALITY SERVICE & ASSOCIATES Inc.
  
2. The name and address of the registered agent and office is:  
                                    ZILSA PERALES-MENDIETA  
  (NAME)  
  
                                    5900 West 20th Avenue  
  (P.O. BOX NOT ACCEPTABLE)  
  
                                    Hialeah, Florida 33016  
  (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 \_\_\_\_\_

*Lisa Mendu*

DATE 12-29-98

98 DEC 30 PM 1:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

REGISTERED AGENT FILING FEE: \$35.00