# OFFICE SE ONLY (Secument) MANUAL STATES OF THE SECOND STATES OF THE SECO

| OFFICE SE ONLY (Socument #)                           | MI               | JUA I                  | <b>ノ</b> /  |                |
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| LAZARUS CORPORATE FILING SE                           | RVICE, INC.      |                        | •   |                |
| (Requestor's Name)                                    |                  | ,                      | س رستن رستن کی رستن رستن رستن رستن رستن رستن رستن ر |                |
| 3320 S.W. 87th AVENUE                                 |                  | 5UL                    | 0 <b>002801096</b><br>-03/10/9901076-               |                |
| (Address)   |                  |                        | *****78.75 ****                                     | *78.75         |
| MIAMI, FLORIDA (305)552-5<br>(City, State, Zip) (Phon |                  |                        |   |                |
| • • • • •   | •                |                        |   |                |
| LOCAL REPRESENTATIVE TALLAHA                          | ASSEE            | OFFICE USE ONLY        |   |                |
| CORPORATION NAME(S) & D                               | OCUMENT NUM      | BER(S) (if known):     | ny Mar  | ,              |
| 1. INPOTECH 200                                       | DO, COM          | 0.                     | S 9   | ering is see   |
| (Corporation Name)                                    | / - /            | (Document #)           | L MAR   |                |
| (Corporation Name)                                    |                  | (Document #)           |   |                |
| 3.  |                  |                        |   | -              |
| (Corporation Name)                                    |                  | (Document #)           |   |                |
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| (Corporation Name)                                    | _                | (Document #)           | 57<br>DA  |                |
| Walk in Pick up time                                  | 2,00             | Certified Cor          | - ,   |                |
| Mail out Will wait                                    | Photocopy        | Certificate of         | Status  |                |
|   |                  |                        | 71 -: ·   |                |
| NEW FILINGS   | AMENDM           | ENTS                   |   |                |
| χ Profit  | Amendment        |                        |   |                |
| NonProfit   | Resignation of F | R.A., Officer/Director |   |                |
| . Limited Liability                                   | Change of Regist | tered Agent            |   | •              |
| Domestication   | Dissolution/With | drawal                 | 9   | . ~            |
| Other   | Merger           |                        | 40;S  | <del>ا</del> ا |
|   |                  | A                      |   |                |
| OTHER FILINGS   | REGISTRATIO      |                        |   | 7              |
| 5 7.55 × 765 C.   | QUALIFICATIO     |                        | Reg #   | Margin II I    |
| Annual Report   | Foreign          |                        | WA TO   | Ĭ              |
| Fictitious Name                                       | Limited Partners | hip / '                | 99 MAR 10 AM 11: 20 DIVISION OF CORPORATION         | ** ::          |
| Name Reservation                                      | Reinstatement    |                        |   |                |
|   | Trademark        |                        |   |                |
|   | 0.1              |                        |   |                |

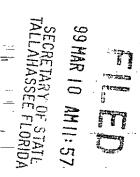
Examiner's Initials

## 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:



#### ARTICLE II PRINCIPAL OFFICE

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

10300 SW 72 nd st. Swife 499 Wirmy FL. 33173.

### ARTICLE III SHARES

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

\* 1,000.

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Eduardo R Tocces. 10300 SW 72nd of Suite 499. Wirmin FL 33173

#### ARTICLE V INCORPORATOR(S)

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

Eduardo R. Torres. 10300 SW 72nd st. Suite 499. Within FL. 33173.

#### ARTICLE VI DIRECTOR(S)

|  | es) of the director(s) to these Articles of |      |
|--|---|------|
| Incorporation is(are):                             | 0 -1-4                                      |      |
| Edurado R. TORRE                                   | - President<br>- Vice - President           |      |
| RAFAEL TOCKES                                      | - Vice - PRESIDENT                          |      |
|  | - SECRETARY - TREASUR                       | シービ・ |
| MARY Rodeiques<br>10300 SW 72rd of<br>Whim FC 3317 | Svite 499 _                                 |      |
| The undersigned incorporator(s) Incorporation this | has(have) executed these Articles of        |      |
|  |   |      |
|  |   | -    |
| <u>.</u>   | CHI S                                       |      |
|  | Signature                                   | ÷    |
|  |   |      |
|  | Signature                                   | •    |

Articles of Incorporation Filing Fee - \$35

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: ING TECH 2000, CORP.   |
|------|--|
| 2.   | The name and address of the registered agent and office is:  |
|      | Eduração R. Tocres   |
|      | (NAME)   |
|      | 10300 SW 72nd of. Suite 499.  (P.O. BOX NOT ACCEPTABLE)  |
|      | (P.O. BOX NOT ACCEPTABLE)  |
|      | Myani Fl. 33173. (CITY/STATE/ZIP)  |
|      | VING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF   |
|      | OCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE SIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS   |
|      | ALCOHOMOS A OCKIT AND ACCORD TO ACTIN 1805 CAPACITY, FRUNTISH  |
|      | WARE TO COMPLY WITH THE DROVISIONS OF ALL STATUTES RELATING TO   |
|      | REE TO COMPLY WITH THE PROPERTY OF MY DUTIES, AND I AM E PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM MILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS   |
| 1:15 | GISTERED AGENT.  |
|      | GISTERED AGENT.  |
|      | SIGNATURE SSENT OF STREET  |
|      | SIGNATURE TO THE STATE OF THE S |
|      |  |

DATE