

**P9900025874**

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

400002813364--9  
-03/22/99--01092--011  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. LAS-OLAS INT'L INVESTMENTS 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**  
99 MAR 22 PM 12:59  
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**  
99 MAR 22 AM 11:51  
DIVISION OF CORPORATION

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:

**Las-Olas Int'l Investments Inc.**

### ARTICLE II - PRINCIPAL OFFICE:

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

**3870 N. 31st Terrace , Hollywood Florida 33021**

### ARTICLE III - SHARES:

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

**One thousand shares.**

### ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and address of the initial registered agent is:

**Jack Oved  
3870 N. 31st Terrace  
Hollywood , Florida 33021**

**FILED**  
99 MAR 22 PM 12:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE V - INCORPORATOR(S):**

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

**Jack Oved  
3870 N. 31st Terrace  
Hollywood , Florida 33021**

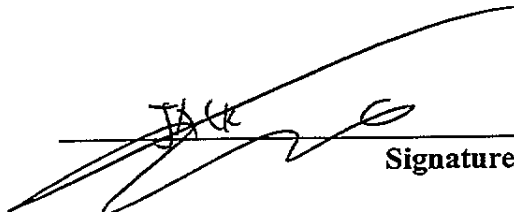
**ARTICLE VI - DIRECTOR(S):**

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

**Jack Oved  
Betty Oved**

**3870 N. 31st Terace Hollywood, Florida 33021  
3870 N. 31sr Terrace Hollywood, Florida 33021**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this **09 day of March, 1999.**

  
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:

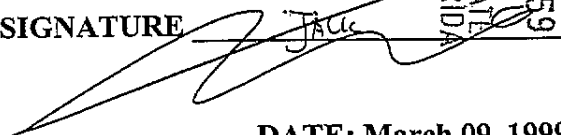
**Las-Olas Int'l Investments Inc.**

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

Jack Oved 3870 N. 31st Terrace  
Hollywood, Florida 33021

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: March 09, 1999

99 MAR 22 PM 12:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED