OFFICE I E QUA (D. Anel)		135	22	<b>?/</b> )
LAZE US CORPORATE FILING SE (Requestor's Name)  3320 S.W. 87th AVENUE (Address)  MIAMI, FLORIDA (305)552-(City, State, Zip) (Pho	-5973 ne #)	4 () (	00028401 -04715/9901 ******78.75	
CORPORATION NAME(S) & 1  (Corporation Name)  (Corporation Name)  (Corporation Name)  4.	DOCUMENT NUN	(Document #)  (Document #)	99 APR 16 PM 3: SECRETARY OF ST TALLAHASSEE FLO	
(Corporation Name)  Walk in Pick up time  Mail out Will wait	Photocopy	(Document #)  Certified Copy  Certificate of S	RATE 9	
Profit NonProfit Limited Liability Domestication Other	AMENDA Amendment Resignation of Change of Regis Dissolution/With Merger	R.A., Officer/Director stered Agent ndrawal		t 
OTHER FILINGS  Annual Report  Fictitious Name  Name Reservation	REGISTRATION QUALIFICATION Foreign Limited Partners Reinstatement Trademark	ON/ ON ship	NVISION OF COMPORATION	99/10/11/19

Other

Examiner's Initials



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 15, 1999

**LAZARUS** 

MIAMI, FL

SUBJECT: ELTEK INC.

Ref. Number: W99000009033

We have received your document for ELTEK INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 699A00019338

# ARTICLES OF INCORPORATION

OF

THE UNDERSIGNEED INCORPORATOR(S) FOR THE PURPOSE OF FORMING CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT HEREB ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

#### ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE. ELTEK GROUP INC.

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE: 10910 SW 72 ST UNIT 271 MIAMI, FL 33173.

#### ARTICLE II NATURE OF BUSINESS

THIS CORPORATION MAY ENGAGE IN OR TRANSACT ANY OF ALL LAWFUL\_ACTIVITIES
BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES THE STATE OF
FLORIDA OR ANY OTHER STATE COUNTRY TERRITORY OR NATION

#### ARTICLE III CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE THATR THIS CORPORAATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS

1000 SHARES OF ONE DOLLAR \$1.00 PAR VALUE COMMON STOCK.

## ARTICLE IV TERM OF EXISTENCE.

THIS CORPORATION IS TO EXIST PERPETUALLY.

## ARTICLE V OFFICERS DIRECTORS

THE NAME(S) AND STREET ADDRESS OF THE INITIAL OFFICER(S) AND DIRECTORS IF ANY WHO SHALL HOLC OFFICE THE FIRST YEAR OF THE CORPORATION(S) EXISTENCE OR UNTIL THEIR SUCCESSOR(S) IS (ARE) ELECTED. IS (ARE):

ARMANDO DIAZ

PRESIDENT

# ARTICLE VI INCORPORATOR (S)

ARMANDO DIAZ

PRESIDENT

10910 SW 72 ST UNIT 271 MIAMI, FL 33173

IN WITNESS WHEREOF THE UNDERSIGNED INCORPORATOR(S) HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS 13 DAY OF APRIL 1999.

SIGNATURE(S) OF INCORPORATOR(S)

# CERTIFICATE DESIGNATING REGISTERED AGENT/ REGISTERED OFFICE

PURSUANT TO PROVISIONS OF SECTION 607.325 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

ELTEK GROUP INC.

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

ARMANDO DIAZ 10910 SW 72 ST UNIT 271 MIAMI, FL 33173.

(P.O. BOX NOT ACCEPTABLE)

SIGNATURE (

APRIL 13,1999

CORPORATE OFFICER

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE. I HEREBY AGREE TO IN THIS CAPACITY AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTIONS 607.325 FLORIDA STATUTES.

SIGNATURE

REGISTERED AGENT APRIL 13,1999