OFFECTIONSE ONE (Document) LAZARUS CORPORATE FILING S (Requestor's Name) 3320 S.W. 87th AVENUE	WWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWW	55
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CORPORATION NAME(S) &	DOCUMENT NUMBER(S) (if known):	- ·
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(Corporation Name) 3.	(Document #)	₩ <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
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NEW FILINGS	AMENDMENTS	ASSET P
Profit	Amendment	PH 2:
NonProfit	Resignation of R.A., Officer/Director	
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Other	Merger	
OTHER FILINGS Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION Foreign Limited Partnership/01800 + 133 SAHATIA Reinstatement	1/20
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ARTICLES OF INCORPORATION OF

REYES MASONRY CORPORATION

APR 28

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be: REYES MASONRY CORPORATION

ARTICLE 11

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE 111

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

(1) / Transact any and all lawful business.

(2) Said corporation shall further have powers:

To have perpetual succession by its corporate name;

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of FIVE HUNDRED (100) shares, having an individual par value of \$5.00 ----

ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be: PABLO JAVIER REYES 2669 S.W. 9 St. Apart # 6 MIAMI, FL. 33135

> The principal office shall be: 2669 S.W. 9 Calle Apart # 6 MIAMI, Fl. 33135

ARTICLE VI

The initial Board of Directors shall consist of a total of ONE (7) person and the name and address of the person who is to serve as an initial director is: PABLO JAVIER REYES 100 % The name and address of the incorporator executing these Articles of Incorporation is:

PABLO JAVIER REYES			-	
2669 S.W. 9 St. Apart	#	6		•
Mi'ami, FL, 33135		. '		-

<u>....</u>

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this $\frac{267h}{day}$ day of <u>APRIL</u>, 19⁹⁹. PABLO JAVIER REYES <u>APRIL</u> STGMANURE

SS.

STATE OF FLORIDA COUNTY OF DADE

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally appeared PABLO JAVIER REYES known to me and known by me to be the person(s) who executed the foregoing Articles of Incorporation, and he (they) acknowledge before > me that he (they) executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this <u>267H</u> day of <u>APRIE</u> 1999

Reina L. Haber Y COMMISSION # CC757315 EXPIRES July 28, 2002 BONDED THRU TROY FAIN INSURANCE, INC.

PUBLIC, NOTARY STATE FLORIDA AT LARGE

My Com sion Expires:

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

99 APR

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PM

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VETARY OF STA

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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: TREYES MASONRY, CORPORATION

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

(NAME)	•
2669 Siv 9 St. Apart #	⁵ 6
(P.O. BOX NOT ACCEPTABLE)
MIAMI, FL, 33135	

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 PER-FORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGA-TIONS OF MY POSITION AS REGISTERED AGENT.

¢, SIGNATURE 10 26, APRIL 1999 DATE