

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

000002867210--3

-05/07/99--01076--021

\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. E.L. RESEARCH 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

Examiner's Initials

**ARTICLES OF INCORPORATION  
OF**

***E.L. RESEARCH ASSOCIATES, INC.***

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

**ARTICLE I. NAME**

The name of the corporation shall be:

***E.L. RESEARCH ASSOCIATES, INC.***

The principal address of this corporation shall be:

***5255 NW 87TH AVENUE, #301  
MIAMI, FLORIDA 33178***

**FILED**  
99 MAY -7 PM 2:42  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE II. NATURE OF BUSINESS**

This corporation may engage or transact in any or all lawful activities for 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 maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock have a par value of \$1.00 per share.

**ARTICLE IV. ADDRESS**

The street address of the initial registered office of the corporation shall be ***5255 NW 87TH AVENUE, #301, MIAMI, FLORIDA 33178***, and the name of the initial registered agent of the corporation at that address ***STEPHEN M. ZALKA***.

**ARTICLE V. TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE VI. SPECIAL PROVISION**

This corporation shall have officer(s) and director(s), initially. The name and street address of the initial officer(s) and director(s) who shall hold office for the first year of the corporation, or until his successor is elected or appointed are/is:

*DR. ESTER LEVIN*

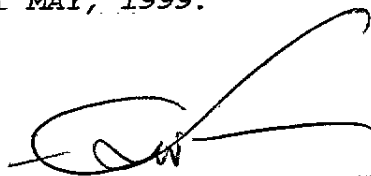
*PRESIDENT/SECRETARY*

**ARTICLE VII. SUBSCRIBER**

The name and street address of the subscriber to these Articles of Incorporation is:

*DR. ESTER LEVIN  
5255 NW 87TH AVENUE, #301  
MIAMI, FLORIDA 33178*

In WITNESS WHEREOF, the undersigned has hereunto set her hand and seal on this \_\_ day of MAY, 1999.



(SEAL)

State of Florida

County of Dade

The foregoing instrument was acknowledged before me this \_\_\_\_\_  
day of *MAY*, 1999, by

\_\_\_\_\_  
Notary Public, State of Florida at Large

My Commission Expires \_\_\_\_\_

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, 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:

E.L. RESEARCH ASSOCIATES, INC.

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

STEPHEN M. ZALKA

(Name)

5255 NW 87TH AVENUE, #301

(P.O. Box NOT ACCEPTABLE)

MIAMI, FLORIDA 33178

(City/State/Zip)

SIGNATURE



(Director)

TITLE

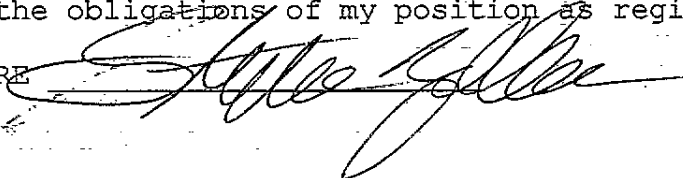
PRESIDENT/SECRETARY

DATE

5/4/99

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. 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

0.

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

99 MAY -7 PM 2:4

FILED