

OFFICE USE ONLY (Document)

HAZARDUS 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

400002922234--2

-07/02/99-01055--005

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

OFFICE USE ONLY

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

1. NAR 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               |

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

99 JUL -2 PM 1:19

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Examiner's Initials

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a Corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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ARTICLE 1 NAME

The name of the corporation shall be:

NAR INC

ARTICLE 2 PRINCIPAL OFFICE

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

3791 SW 139th Court, Miami Florida 33175

ARTICLE 3 SHARES

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

100 Shares at \$ 1.00 P/V

ARTICLE 4 INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

Nancy R Dominguez 3791 SW 139th Court Miami Fl 33175

ARTICLE 5 -INCORPORATORS

The name and street address of the incorporator to this Articles of Incorporation is:

Nancy R Dominguez, 3791 SW 139th Court, Miami Fl 33175

ARTICLE 6 INITIAL BOARD OF DIRECTORS

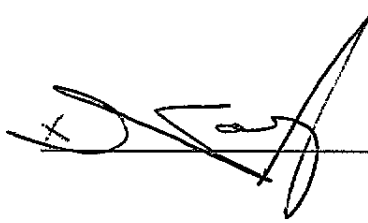
The corporation shall have One director initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but never shall be less than (1) The name and address of the initial director is

NANCY R DOMINGUEZ 3791 SW 139th Court, Miami Fl 33175

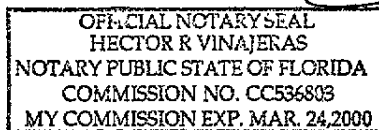
The name and address of the person signing these Articles of Incorporation is:

NANCY R DOMINGUEZ 3791 SW 139th Court, Miami Fl 33175

IN WITNESS WHEREOF, the undersigned suscriber(s) have executed these Articles of Incorporation this 25 day of June 1999.

  
\_\_\_\_\_

Sworn to and suscribed before me this June 25 1999

  
\_\_\_\_\_  
Notary Public

Hector R. Vinajeras  
Notary's Name, Personally Known  
or Produced ID \_\_\_\_\_  
Type of ID Produced: \_\_\_\_\_

CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT.

CERTIFICATE OF REGISTERED AGENT OF;

NAR INC

Pursuant to Provisions of Section 607.051 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: NAR INC

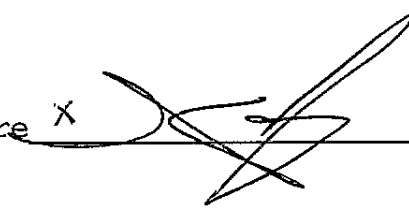
2. The name and address of the Registered Agent and office is:

NANCY R DOMINGUEZ 3791 SW 139th Court, Miami FL 33175

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ACKNOWLEDGEMENT.

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 \_\_\_\_\_