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

1. B.N.T.S.O. INC.

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

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<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
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REGISTRATION/QUALIFICATION	
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<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

99 AUG 25 PM 3:31

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99 AUG 16 AM 11:50

DEPARTMENT OF REVENUE  
TALLAHASSEE FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

August 16, 1999

LAZARUS

MIAMIO, FL

SUBJECT: B.N.T.S.O., INC.  
Ref. Number: W99000018928

We have received your document for B.N.T.S.O., 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: 899A00041207

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TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

### OF

B.N.T.S.O. GROUP, INC.

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TALLAHASSEE FLORIDA  
SECRETARY OF STATE

The undersigned, for the purpose of forming a corporation for profit under the laws of the State of Florida, hereby adopts the following Articles of Incorporation.

#### Article I

##### NAME

The name of the corporation is **B.N.T.S.O. GROUP, INC.** and the principal address shall be 438 Village Lake Drive, BonaVenture, Florida 33327

#### Article II

##### DURATION

The Corporation shall exist perpetually. Corporate existence shall commence upon filing by The Department of State.

#### Article III

##### NATURE OF BUSINESS

The Corporation may engage in any activity or business permitted under the laws of The United States and under the Laws of The State of Florida.

#### Article IV

##### CAPITAL STOCK

- 1.- Authorized Capital. The maximum number of shares of stock which this Corporation is authorized to have outstanding at any one time is ONE THOUSAND (1,000) shares of stock with one dollar (1.00) par value. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.
- 2.- Preemptive Rights: Shareholders shall have no preemptive rights.
- 3.- Cumulative voting: Cumulative voting shall not be permitted.

## Article V

### INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is:  
438 Village Lake Drive, BonaVenture, Florida 33327  
and the name of the initial registered agent of this corporation at that address is  
OMAR VERA

## Article VI

### DIRECTOR

- 1.- **Number.** This corporation shall have one (1) Director initially. The number of directors may be increased from time to time by the by-laws, but shall never be less than one.
- 2.- **Initial Director.** The name and street address of the Directors of the corporation are:

Name	Address
Carlos Garcia President	438 Village Lake Drive, BonaVenture, Florida 33327
OMAR VERA Secretary Treasurer	438 Village Lake Drive, BonaVenture, Florida 33327

- 3.- **Compensation.** The Board of Directors is hereby specifically authorized to make provisions for reasonable compensation to its members for their services as Directors and to fix the basis and conditions upon which such compensation shall be paid. Any Director of the corporation may also serve the corporation in any other capacity and receive compensation therefore in any form.
- 4.- **Indemnification.** The Board of Directors is hereby specifically authorized to make provisions for indemnification of directors, officers, employees and agents to the full extent permitted by law.

## Article VII

### BYLAWS

The initial bylaws of this corporation shall be adopted by the directors. Bylaws shall be adopted, altered, amended or repealed from time to time by either the shareholders or the Board of Directors, but The Board of Directors shall not alter, amend or repeal any bylaw adopted by the shareholders if the shareholders specifically provide that such by law is not subject to amendment or repeal by the director.

**Article VIII**

**INCORPORATOR**

OMAR VERA  
438 Village Lake Drive  
BonaVenture, Florida 33327

**Article IX**

**AMENDMENT**

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation and any right conferred upon the shareholders is subject this reservation.

IN WITNESS WHEREOF, The incorporator has executed these articles this 9<sup>th</sup> day  
Of August, 1999.



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OMAR VERA

**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:

*B.N.T.S.O. GROUP, INC*

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

*OMAR VERA  
438 VILLAGE LAKE DRIVE  
BONAVENTURE, FL 33321*

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 RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

DATE: *Aug 16, 1999*

*[Signature]*  
\_\_\_\_\_  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA  
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**FILED**