

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

OFFICE USE ONLY

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

1. GARCIA DOLLAR STORE 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

RECEIVED

99 OCT 20 AM 11:29  
TALLAHASSEE, FLORIDA

FILED

99 OCT 20 PM 2:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

700003019577-3

-10/20/99-01046-021

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

## ARTICLES OF INCORPORATION

FILED  
99 OCT 20 PM 2:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

### ARTICLE I NAME

The name of the corporation shall be:

GARCIA DOLLAR STORE INC

### ARTICLE II PRINCIPAL OFFICE

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

c/o 8925 N.W. 119 Terr.  
Hialeah Gardens, FL 33018

### ARTICLE III SHARES

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

7,500 COMMON SHARES  
\$1.00 PAR VALUE.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

OLIVIA GARCIA.  
c/o 8925 N.W. 119 Terr  
Hialeah Gardens, FL 33018

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

OLIVIA GARCIA.  
c/o 8925 N.W. 119 Terr.  
Hialeah Gardens, FLA. 33016.

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

OLIVIA GARCIA - President  
c/o 8925 N.W. 119 Terr.  
Hialeah Garden, FL 33016

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 12 day of OCTOBER, 1999.

x OLIVIA GARCIA  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

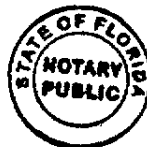
STATE OF FLORIDA  
COUNTY OF DADE

BEFORE ME, a Notary Public authorized to take acknowledgement in the State and county set forth above, personally appeared, all the above Incorporators known to be and known by me to be the persons who executed the foregoing Articles of Incorporation, and they acknowledged to me that they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County above, this

12 day of OCT, 1999

Felix R. Maymi  
Notary Public



FELIX R. MAYMI  
My Comm Exp. 4/11/00  
Bonded By Service Ins  
No. CC547125  
☒ Personally Known ☐ Other I.D.

**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: GARCIA DOLLAR STORE INC
2. The name and address of the registered agent and office is:  
OLIVIA GARCIA  
(NAME)  
40 8925 N.W. 119 Terr.  
(P.O. BOX NOT ACCEPTABLE)  
HUNTER GARDENS, FL 33019  
(CITY/STATE/ZIP)

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 Olivia Garcia

DATE 10/12/99

REGISTERED AGENT FILING FEE: \$35.00

FILED  
99 OCT 20 PM 2:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA