

PI 00000084846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

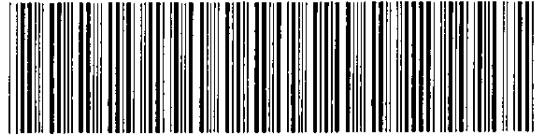
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/15/10--01037--005 \*\*78.75

*W10-4864*

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

RECEIVED  
10 OCT 15 AM 11:25

FILED  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

FILED  
OCT 18 PM 2:49

OCT 19 2010

# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

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

1. ALV MANAGEMENT AND SOLUTION  
(Corporation Name) (Document #)
2. Group, Inc.  
(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

- Profit  
 Not for Profit  
 Limited Liability  
 Domestication  
 Other

### AMENDMENTS

- Amendment  
 Resignation of R.A., Officer/Director  
 Change of Registered Agent  
 Dissolution/Withdrawal  
 Merger

### OTHER FILINGS

- Annual Report  
 Fictitious Name

### REGISTRATION/QUALIFICATION

- Foreign  
 Limited Partnership  
 Reinstatement  
 Trademark  
 Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 18, 2010

LAZARUS

SUBJECT: ALV MANAGEMENT AND SOLUTION GROUP, INC.  
Ref. Number: W10000048604

We have received your document for ALV MANAGEMENT AND SOLUTION GROUP, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

An effective date **may** be added to the Articles of Incorporation **if a 2011 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the corrected 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) 245-6928.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 410A00024503

**ARTICLES OF INCORPORATION**

The undersigned incorporated, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of incorporation.

**ARTICLES I - NAME**

The name of the corporation shall be

ALV MANAGEMENT AND SOLUTION GROUP, INC .

**ARTICLES II - PRINCIPAL OFFICE**

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

900 W 49<sup>TH</sup> STREET SUITE 508 HIALEAH, FL 33012

**ARTICLES III - SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES

**ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

DIANA SOTO  
900 W 49<sup>TH</sup> STREET SUITE 508 HIALEAH, FL 33012

**ARTICLE V - INCORPORATOR**

The name and street address of the incorporator to these Articles of incorporation is:

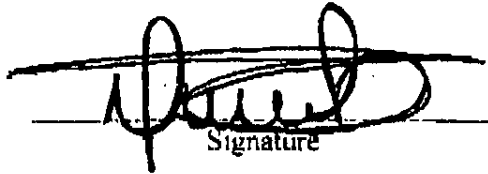
DIANA SOTO  
900 W 49<sup>TH</sup> STREET SUITE 508 MIAMI, FL 33012

SECRETARY OF STATE  
CORPORATION DIVISION  
TALLAHASSEE, FLORIDA

OCT 18 PM 2:49

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The undersigned incorporator has executed these Articles of incorporation this 14<sup>TH</sup> day of OCTOBER 2010.

  
Signature

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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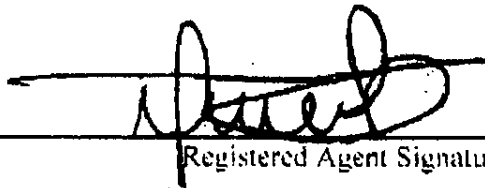
**ARTICLE VI - DIRECTOR(S)**

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

DIANA SOTO PRESIDENT  
900 W 49<sup>TH</sup> STREET SUITE 508 HIALEAH, FL 33012

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

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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

  
Registered Agent Signature