

P21000021851 H210000935143
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : SICONT ENTERPRISES OF AMERICA INC
Account Number : I20160000041
Phone : (407)443-8973
Fax Number : (407)930-2626

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
VISIONARY'S INVESTMENTS INC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$70.00 |

RECEIVED
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DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

COVER LETTER

H210000935-143

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Visionary's Investments Inc

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Sicont Enterprises of America Inc

Name (Printed or typed)

13574 Village Park Dr. Ste. 250

Address

Orlando, FL 32837

City, State & Zip

407-443-8973

Daytime Telephone number

sunbiz.sicont@hotmail.com

E-mail address: (to be used for future annual report notification)

2021 MAR -9 PM 3:24

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Visionary's Investments Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address: 2432 Swalies Dr, Apt 6
Orlando FL 32837
Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____
The company will engage in any and all lawful business allowed in the
United States of America and the State of Florida

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| | | | |
|-----------------|--|-----------------|--|
| Name and Title: | <u>Luis E. Perez Santiago, P</u> | Name and Title: | <u>Elismarie Velez Reyes, VP</u> |
| Address: | <u>2432 Swalies Dr. Apt 6</u> <u>Orlando FL 32837</u> | Address: | <u>2432 Swalies Dr. Apt 6</u> <u>Orlando FL 32837</u> |

| | | | |
|-----------------|-------|-----------------|-------|
| Name and Title: | _____ | Name and Title: | _____ |
| Address: | _____ | Address: | _____ |

| | | | |
|-----------------|-------|-----------------|-------|
| Name and Title: | _____ | Name and Title: | _____ |
| Address: | _____ | Address: | _____ |

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Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Orlando Registered Agents LLC
 Address: 13574 Village Park Dr. Ste. 250
Orlando FL 32837

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Desiree Torres
 Address: 13574 Village Park Dr. Ste. 250
Orlando FL 32837

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Desiree Torres
 Required Signature/Registered Agent

02/26/2021
 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Desiree Torres
 Required Signature/Incorporator

02/26/2021
 Date

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