

P21000092376

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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
VIA VITAE INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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2021 OCT 25 11:2:52

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

ARTICLE I NAME: The name of the corporation is:

Via Vitae Inc.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

14262 SW 140 St. Unit 111
Miami FL. 33186

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

President: Susana Alicia Guiragossian
VP: Judith Alejandra Barbieri
Secretary: Edmundo Miguel Gastaldi
Treasurer: Carlos Daniel Barbieri

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Judith Alejandra Barbieri
14262 SW 140 St. Unit 111
Miami FL. 33186

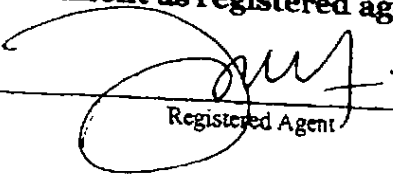
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Judith Alejandra Barbieri
14262 SW 140 St. Unit 111
Miami FL. 33186

11/11/2021 11:25:52

Required Signatures:

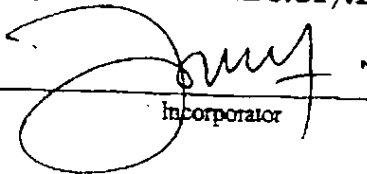
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



 Registered Agent

 10-25-21
 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.



 Incorporator

 10-25-21
 Date

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

From: Account Name : CLARA GIRALDO ENROLLED AGENT
Account Number : I19990000017
Phone : (305)485-9300
Fax Number : (305)485-1098

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
FRAY MOVING DELIVERY AND SERVICE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

OF

FRAY MOVING DELIVERY AND SERVICE, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:

FRAY MOVING DELIVERY AND SERVICE, INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Said corporation shall further have powers:
To have perpetual succession by it's corporate

FRAY MOVING DELIVERY AND SERVICE, INC.

ARTICLE IV

The aggregate number of shares, which the corporation shall have authority to issue, is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation

ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

**FRAYBER PUERTA
6833 NW 173 RD DR APT R106
HIALEAH, FL 33015**

The principal office shall be:

**6833 NW 173 RD DR R106
HIALEAH, FL 33015**

ARTICLE VI

The initial Board of Directors shall consist of a total of ONE (01) person, and the name and address of the person who is to serve as initial director:

**FRAYBER PUERTA
6833 NW 173 RD DR R106
HIALEAH, FL 33015**

PRESIDENT

The name and address of the incorporator executing these Articles of Incorporation is

**FRAYBER PUERTA
6833 NW 173 RD DR R106
HIALEAH, FL 33015**

IN WITNESS WHERE OF, the undersigned incorporator has (ve) executed these Articles of Incorporation this OCTOBER 25, 2021.



FRAYBER PUERTA

ARTICLE VII

THIS CORPORATION WILL START OPERATING ON JANUARY 1ST, 2022.

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

Pursuant to the provision 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:

FRAY MOVING DELIVERY AND SERVICE, INC.

2. The Name and Address of the registered agent and office is:

**FRAYBER PUERTA
6833 NW 173 RD DR R106
HIALEAH, FL 33015**

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: OCTOBER 25, 2021

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