

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000028954 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 922-4001

From:

l of 2

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

: (305)634~3694

Fax Number

: (305)633-9696°

FLORIDA PROFIT CORPORATION OR P.A.

V.D.L CONTRACTORS OF FLORIDA, INC.

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

ARTICLES OF INCORPORATION

(b)

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 1 NAME

THE NAME OF THE CORPORATION SHALL BE:

V.D.I. CONTRACTORS OF FLORIDA, INC.

ARTICLE 11 PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

17945 SW 188 STREET MIAMI, FLORIDA 33187 SECHETARY OF STATE

BIVISION OF CORPORATIONS

OI MAR 21 PM 1:38

ARTICLE 111 SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

JULIO LEYVA 17945 SW 188 STREET MIAMI, FL. 33187

PREPARED BY: SHIRLEY ALMAZAN 10477 SW 40 STREET, MIAMI, FL. 33165/305-227-0378

H 01000028954

ARTICLE V

INCORPORATOR(S)

THE NAME(S) AND ADDRESS(ES) OF THE INCORPORATOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

JULIO LEYVA -17945 S.W. 188 STREET MIAMI, FL. 33187 PRESIDENT/SECRETARY TREASURER

THE UNDERSIGN INCORPORATION	ED INCORPORATOR	$A \sim \setminus \bigcup$	EXECUTED THE February	ESE ARTICLES O ,2000.	F
Signature	JULIO LHIVA		,		
Signature					
Signature	1				

PREPARED BY: SHIRLEY ALMAZAN 10477 SW 40 STREET, MIAMI, FL. 33165/305-227-0378

H 01000028954

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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:	
V.D.I. CONTRACTORS OF FLOPIDA, INC.	
•	
2. The name and address of the registered agent and office is:	
JULIO LEYVA	
(Name)	
17945 SW 188 STREET	<u></u>
(Address) MIAMI, FLORIDA 33187	<u></u>
(City/State/Zip)	
(CRyrotate sup)	
Having been named as registered agent and to accept service of process for the above stated corpor the place designated in this certificate. I hereby accept the appointment as registered agent and agract in this capacity. I further agree to comply with the provisions of all statutes relating to the proper complete performance of my duties, and I am familiar with and accept the obligations of my position registered agent.	r and
Signature JULIO LEYYA	Date
-	- ISEC
	OI MAR 21
	2 43
33165/305-227-0378	PH RES
PREPARED BY: SHIRLEY ALMAZAN 10477 SW 40 STREET, MIAMI, FL. 33165/305-227-0378	بسب دنو
	7. 32 32. 52. 52. 52. 52. 52. 52. 52. 52. 52. 5

H 01000028954