

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

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

1. V.I.P. CONCIERGE SERVICES, INC
(Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☐ Mail out ☐ Will wait

☐ Photocopy

☒ Certified Copy

☐ 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 checked="" type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 30, 2001

LAZARUS

MIAMI, FL

SUBJECT: V.I.P. CONCIERGE SERVICES, INC..
Ref. Number: W01000012234

We have received your document for V.I.P. CONCIERGE SERVICES, INC..
However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or
it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One
or more major words may be added to make the name distinguishable from the
one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the 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) 487-6934.

Loria Poole
Corporate Specialist
New Filings Section

Letter Number: 401A00032907

RECEIVED
01 MAY 31 PM 12:46
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

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.

FILED
01 MAY 31 PM 2:16
TAMPA
SECRETARY OF STATE
FLORIDA

ARTICLE I - NAME

The name of the corporation shall be:

INTERNATIONAL VIP CONCIERGE SERVICES, INC.

ARTICLE II - PRINCIPAL OFFICE

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

10410 SW 26th Street
MIAMI FLORIDA 33165

ARTICLE III - SHARES

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

500

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

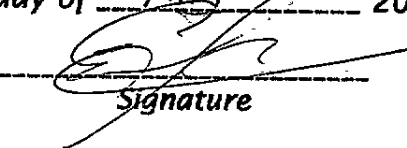
ERNESTO DIAZ
10410 SW 26 Street.
MIAMI FL 33165

ARTICLE V - INCORPORATOR

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

ERNESTO DIAZ
10410 SW 26th Street
MIAMI FL 33165

The undersigned incorporator has executed these Articles of Incorporation this 29th day of MAY 2001


Signature

ARTICLE VI- DIRECTOR(S)

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

ERNESTO DIAZ
10410 SW 26th Street
MIAMI FL 33165

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

FILED
01 MAY 31 PM 2:16
TALLAHASSEE FLORIDA
SECRETARY OF STATE