PO/OOO/2022

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

SUBJECT: VALLE BELLA, INC. 90004686939--3 -11/19/01--01028--013 ******78.75 *****78.75 (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

icles of incorporation and	a check for:	
□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
LOMIA (Printed or typed)		** *** *
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3528 -	OI NOV 19 PM 4: 31 SECRETARY OF STAT TALLAHASSEE, FLORI	TI Find
	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO LUMIA (Printed or typed) Address 33132 State & Zip 3528 elephone number	Filing Fee, & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED LOM M. SUIE 3144 Address 33132 State & Zip 3528 elephone number

8 11/st

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: VALLEBELLA INC ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1717 N. BAYSHORE DR. SUITE 3144 33132 MIAMI FL ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: DESIGN ARTICLE IV SHARES The number of shares of stock is: 500 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): FRANCESCO LA WHIA 1717 N. PRAY Share Mr. NITE 3144, Miram FL 33192 PRESIDENT ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: N. RAY Shore DR. JUITE 3144, MIAMI, FL 33132 FNANCESCO LA LUMIA ARTICLE VII INCORPORATOR The name and address of the Incorporator is: LA WMIA FRANCE 500 1717 N. My Shore Mr. SVITE 3144

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

| W | 4 | 0 |
| Signature/Registered Agent | Date

Signature/Incorporator

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