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OF JAN -3 PH 3: 51

TRANSMITTAL LETTER

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

SUBJECT: VM	IV, INC. (PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$\overline{87.50}\$ Filing Fee, Certified Copy & Certificate of Status
FROM:	ADOLFO C. LOZANO	(Printed or typed)	<u></u>
	10510SW 66TERR	Address	ng ja
	MIAMI, FL. 33173	State & Zip	<u> </u>
	305-303-3658	elephone number	<u> </u>

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

	OF INCORPORATION the Chapter 607 and/or Chapter 607	
ARTICLE I	NAME	-

VMV,INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 10510SW 66TERR. MIAMI FL. 33173

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This Corporation may engage in any activity or business permitted under the laws of the United States of America and the laws of the State of Florida

ARTICLE IV SHARES The number of shares of stock is:

100% ADOLFO LOZANO

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ADOLFO C. LOZANO 10510SW 66TERR, MIAMI FL. 33173, PS.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ADOLFO C. LOZANO 10510SW 66TERR. MIAMI FL. 33173.

ARTICLE VII _ INCORPORATOR

The name and address of the Incorporator is:

ADOLFO C. LOZANO 10510SW 66TERR, MIAMI FL. 33173.

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 familter with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

Date

Date

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