# P0300097953

(Requ	estor's Name)	
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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE

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# TRANSMITTAL LETTER

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

SUBJECT:	V.LP WINE CLUB, INC	C			
(Proposed corporate name – must include suffix)					
Enclosed is an o	original and one (1) copy of th	e articles of incorporation	and a check for:		
S70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status		
		ADDITIONAL CO	OPY REQUIRED		
	FROM:	RAMON REYES			
	N	ame (Printed or typed) 5035 PALM AVE.			
		Address			
		HIALEAH, FL. 3301	<u>2</u>		
		City, State & Zip (305) 822-0669			
		ayrime Telephone number			

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

# ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

# V.I.P WINE CLUB, INC.

### ARTICLE II PRINCIPAL OFFICE

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

5035 PALM AVE. HIALEAH, FL. 33012

#### ARTICLE III SHARES

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

1,000,000 COMMON SHARES

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ISRAEL A. ZABALLA 5035 PALM AVE. HIALEAH, FL. 33012

#### ARTICLE V INCORPORATOR

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

PRESIDENT /

ISRAEL A. ZABALLA 5035 PALM AVE. HIALEAH, FL. 33012

VICE-PRESIDENT RAMON REYES 215 W. 56 ST. HIALEAH, FL. 33012 SECRETARY

Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

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 all accept the obligations of my position as registered agent.

Signature Registered Agent Date