

POS000001406

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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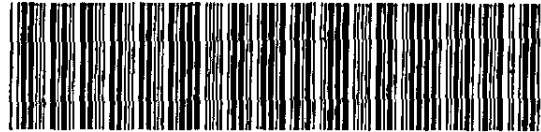
(Business Entity Name)

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TALLAHASSEE, FLORIDA

Is

TRANSMITTAL LETTER

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

SUBJECT: VIVA ASSOCIATES, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: AUGUSTO J. BIANCHI
Name (Printed or typed)

8101 SW 122 ST
Address

MIA FL 33176
City, State & Zip

786-262-1130
Daytime Telephone number

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DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

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

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:

VIVA ASSOCIATES, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11767 S. DIXIE HIGHWAY #217
PINECREST, FLORIDA 33156-4438

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE INVESTMENTS

ARTICLE IV SHARES

The number of shares of stock is:

1,000. -

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

AUGUSTO J. BIANCHI - PRESIDENT
VIOLETA A. BIANCHI - VICE PRESIDENT
ISABELLA M. BIANCHI - TREASURER
VICTORIA M. BIANCHI - SECRETARY

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

AUGUSTO J. BIANCHI
8101 SW 122 ST
MIA FL 33156

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

AUGUSTO J. BIANCHI
8101 SW 122 ST
MIA FL 33156

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

Signature Registered Agent

Date

JAN 01 - 05

Signature Incorporator

Date

JAN-01-05

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05 JAN - 3 PM 2:01
CLERK OF STATE
TALLAHASSEE, FLORIDA