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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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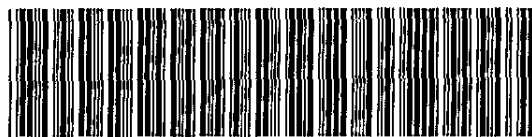
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## TRANSMITTAL LETTER

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

SUBJECT: VISTRADA INTERNATIONAL CORPORATION  
(Proposed corporate name - must include suffix)

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

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.20  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM: ARLENE M. ESTRADA  
Name (Printed or typed)

950 NW 199 TERR  
Address

Pembroke Pines, FL 33029-3366  
City, State & Zip

(954) 632-9410  
Daytime Telephone Number

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

# ARTICLES OF INCORPORATION

*The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 607, Florida Statutes, adopt(s) the following Articles of Incorporation:*

## ARTICLE I

### Name

The name of the corporation shall be:

VISTRADA INTERNATIONAL CORPORATION

## ARTICLE II

### Principal place of business and mailing address

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

950 NW 199 TERR

Pembroke Pines, Fl. 33029-3366

## ARTICLE III

### Purpose(s)

The specific purpose(s) for which the corporation is organized is (are):

THE CORPORATION SHALL ENGAGE IN ANY ACTIVITY OR  
BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED  
STATES AND THE STATE OF FLORIDA

## ARTICLE IV

The officers of the corporation shall be:

President: ARLENE M. ESTRADA

Secretary: ARLENE M. ESTRADA

Treasurer: SANDRA L. MULREY

Filing Fee &

CERTIFICATE: \$78.75

## ARTICLE V

### Limitation of Corporate Powers

The corporate powers of the corporation are as provided in Section 607 Florida Statutes, unless limited as follows:

The Corporation shall have the same powers as an individual to do all things necessary or convenient to carry out its business and affairs, subject to any limitations or restrictions imposed by applicable law or these Articles of Incorporation.

## ARTICLE VI

### Initial registered agent and street address

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

ARLENE M. ESTRADA

950 NW 199 TERR

Pembroke Pines, Fl. 33029-3366

## ARTICLE VII

### Incorporators

See instructions for officers/directors

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is (are):

ARLENE M. ESTRADA

950 NW 199 TERR

Pembroke Pines, Fl. 33029-3366

## ARTICLE VIII

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 2000 Shares.

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 27th day of MAY 2005.

Signature(s) of incorporator(s):



ARLENE M. ESTRADA Typed name of incorporator signing

\_\_\_\_\_  
Typed name of incorporator signing

\_\_\_\_\_  
Typed name of incorporator signing

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501,  
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED  
UNDER LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING  
STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED  
AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: VISTRADA INTERNATIONAL CORPORATION  
(must include suffix)

2. The name and address of the registered agent and office is:

ARLENE M. ESTRADA  
(Name)

(Street address - P.O. Box or Mail Drop Box NOT acceptable)

950 NW 199 Terr Pembroke Pines, FL 33029-3366  
(City/State/Zip)

*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 and accept the obligations of my  
position as registered agent.*

  
(Signature)

MAY 27, 2005  
(Date)