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2007 APR 17 PM 2: 44 SECRETARY OF STATE TALLAHASSEE, FI ORINA

7. SUMMERS YES 18 SUMS

1207-16243

COVER LETTER

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

SUBJECT:	PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
	ginal and one (1) copy of the arti			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	ANTOINETTE VAZOR Name 5055 SW 1554 MIRAMAR, FL City,		SECRETARY OF STATE TAULAHASSEE, FLORIDA	FILED
	301-389-3808 Daytime T	elephone number		

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the corporation shall be:	_
IVA Corps QuezARds Quest, I	HC.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: $\rho.0.13 \times 279055$	
5055 SW 135, Mrs	7
·	1
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Resale of merchandise for profit	
ARTICLE IV SHARES	
The number of shares of stock is:	
200	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	, , , , , ,
List name(s), address(es) and specific title(s): AN to INCHE VAZQUEZ 50555W 155th Ave MIVAMAN, FL 330	org. President
ANTOINETTE INTEQUES SUSS SUITS	2017 - Vice Presi
John YAZQUEZ 5055 SWISSTA Ave MITAMAR, FL 3	200/
	1
ADTICLE VI DEGISTEDED AGENT	DO7 /
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent in the street address (P.O. Box NOT acceptable) of the registered agent in the street address (P.O. Box NOT acceptable) of the registered agent in the street address (P.O. Box NOT acceptable) of the registered agent in the street address (P.O. Box NOT acceptable) of the registered agent in the street address (P.O. Box NOT acceptable) of the registered agent in the street address (P.O. Box NOT acceptable) and the street address (P.O. Box NOT acceptable) of the registered agent in the street address (P.O. Box NOT acceptable) and the street address (P.O. Box NOT acceptable) are street address (P.O. Box NOT acceptable) and the street address (P.O. Box NOT acceptable) are street address (P.O. Box NOT acceptable) and the street address (P.O. Box NOT acceptable) are street address (P.O. Box NOT acceptable) and the street address (P.O. Box NOT acceptable) are street address (P.O. Box NOT acceptable) are street address (P.O. Box NOT acceptable) and the street address (P.O. Box NOT acceptable) are street address (P.O. Box NOT acceptable).	FILEI 2007 APR 17 F SECRETARY OF TALLAHASSEE.
ANTOINETTE VAZQUEZ	IT IT IT
5055 SW 15549 Ave	
MITHMAR, FL 33027	1 2: STA
ARTICLE VII INCORPORATOR	10 A 44
The name and address of the Incorporator is:	
ANTOINETTE VAZQUEZ 5055 SW(STA HY M. CRAMAY PL 35029	
5055 5008 1009	
M. (rAMAR CC > SOL)4	*****
Having been named as registered agent to accept service of process for the above stated corporation at the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capaci	
Adviette Paraner 3/2	7/07
Signature/Registered Agent	late /
Aslocatte Varances 3/2	7/07
Signature/Incorporator D	Pate