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# **COVER LETTER**

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

SUBJECT:	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
Enclosed are an orig	ginal and one (1) copy of the ar	ticles 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	ANTONIO Nami	$\frac{\text{MUDIZ}}{\text{e (Printed or typed)}}$ Address	)	
	(305)	State & Zip  509-6722 Telephone number	<u>(. 331</u> 14	

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

08 JAN -7 AM 9:01

ARTICLES OF INCORPORATION SECRETARY OF STATE TALLAHASSEE, FLORIDA

**OF** 

## ARTICLE I.

#### **NAME**

## THE NAME OF THE CORPORATION IS:

# VILLEMORE, INC.

## ARTICLE II.

## TERM OF THE CORPORATION EXISTENCE

THE CORPORATION SHALL EXIST PERPETUALLY UNLESS DISSOLVED ACCORDING TO LAW AND SUCH EXISTENCE SHALL COMMENCE AT THE TIME OF THE FILING OF THESE ARTICLES OF INCORPORATION BY THE DEPARTMENT OF STATE.

## ARTICLE III.

## PERMITTED ACTIVITY

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

## ARTICLE IV.

## **AUTOHORIZED SHARES**

THE AGGREGATE NUMBER OF SHARES WHICH THE CORPORATION SHALL HAVE AUTHORITY TO ISSUE IS 100 SHARES WITH PAR VALUE OF \$1.00.

#### ARTICLE V.

#### PREEMPTIVE RIGHTS DENIED

NO HOLDER OF ANY SHARES OF THE CORPORATION SHALL HAVE ANY PREEMPTIVE RIGHT TO PURCHASE, SUBSCRIBE FOR OR OTHERWISE ACQUIRE ANY SHARES OF THE CORPORATION OF ANY CLASS NOW OR HEARAFTER AUTHORIZED, OR ANY SECURITES, EXCHANGEABLE FOR OR CONVERTIBLE INTO SUCH SHARES, OR ANY WARRANTS OR ANY INSTRUMENTS EVIDENCING RIGHTS OR OPTIONS TO SUSCRIBE FOR, PURCHASE, OR OTHERWISE ACQUIRE SUCH SHARES.

## ARTICLE VI.

## PRINCIPAL OFFICE

THE PRINCIPAL OFFICE OF THE CORPORATION IS: 7209 N.W. 78<sup>TH</sup> TERRACE MIAMI, FLORIDA 33166.

## ARTICLE VII.

## REGISTERED OFFICE AND AGENT

THE INITIAL REGISTERED OFFICE OF THE CORPORATION IS:

7209 N.W 78<sup>TH</sup> TERRACE – MIAMI, FLORIDA 33166

ANTONIO MUNIZ

## ARTICLE VIII.

#### **DIRECTORS**

THE BUSINESS OF THE CORPORATION SHALL BE MANAGED BY A
BOARD OF DIRECTORS CONSISTING OF NOW FEWER THAN ONE PERSON,
THE EXACT NUMBER TO BE DETERMINED FROM TIME TO TIME IN
ACCORDANCE WITH THE BY-LAWS.

THE NAME AND ADDRESS OF THE FIRST BOARD OF DIRECTORS WHO SHALL SERVE UNTIL THE FIRST ANNUAL MEETING OF SHAREHOLDERS OR UNTIL HIS SUCCESSORS ARE ELECTED AND QUALIFIED SHALL BE:

**NAME** 

ANTONIO MUNIZ

**PRESIDENT** 

## ARTICLE IX.

## **INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

#### **ANTONIO MUNIZ**

1264 MILAN AVENUE CORAL GABLES, FLORIDA 33134

## ARTICLE X.

## INDEMNIFICATION

THE CORPORAT ION SHALL INDEMNIFY ANY PRESENT OR FORMER
OFFICER OR DIRECTOR, OR PERSON EXERCISING POWERS AND DUTIES OF
DIRECTOR, TO THE FULL EXTENT ROW OR HEREAFTER PERMITTED BY
LAW.

IN WITNESS WHEREOF, THE UNDERSIGNED, BEING THE ORIGINAL INCORPORATOR OF THE CORPORATION, HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS 3<sup>RD</sup> DAY OF JANUARY, 2008.

ANTONIO MUNIZ INCORPORATOR

08 JAN -7 AH 9:01

SECRETARY OF STATE TALLAHASSEE, FLORIDA

STATE OF FLORIDA COUNTY OF DADE

I HEREBY CERTIFY THAT ON THIS DAY, BEFORE ME, A NOTARY PUBLIC DULY AUTHORIZED IN THE STATE OF COUNTY NAMED ABOVE TO TAKE ACKNOWLEDGEMENTS PERSONALLY APPEARED BEFORE ME ANTONIO MUNIZ TO BE THE PERSON DESCRIBED HEREIN AS THE INCORPORATOR, AND WHO EXECUTED THE SAME FREELY AND VOLUNTARILY FOR THE USES AND PURPOSES THEREIN SET FORTH AND EXPRESSED.

IN WITNESS WHREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED MY OFFICIAL SEAL ON THIS  $3^{RD}$  DAY OF JANUARY 2008

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

**MY COMMISSION EXPIRES:** 

