

P08000018371

(Requestor's Name)

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PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

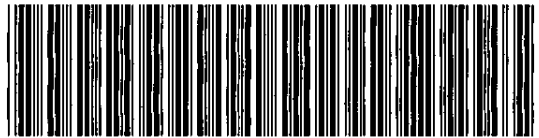
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

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W08-6134



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02/04/08--01032--013 \*\*78.75

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 FEB 19 PM 2:13

Jr 2/20/08

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**COVER LETTER**

08 FEB 19 PM 2:14

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

**SUBJECT:** VCIG, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Ieva Velotta

Name (Printed or typed)

10390 Washingtonia Palm Way #4426

Address

Ft. Myers, FL 33966

City, State & Zip

703-407-5970

Daytime Telephone number

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



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DIVISION OF CORPORATIONS

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 5, 2008

**I**EVA VELOTTA  
10390 WASHINGTONIA PALM WAY #4426  
FORT MYERS, FL 33966

SUBJECT: VCI GROUP, INC.  
Ref. Number: W08000006134

We have received your document for VCI GROUP, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 708A00007563

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 FEB 19 PM 2:14

**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:

VCIG, Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

10390 Washingtonia Palm Way #4426

Ft. Myers, FL 33966

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Accounting Services

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Michael Velotta

Director

10390 Washingtonia Palm Way #4426

Ft. Myers, FL 33966

Jeva Velotta

CFO

10390 Washingtonia Palm Way #4426

Ft. Myers, FL 33966

**ARTICLE VI REGISTERED AGENT**

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

Michael Velotta  
10390 Washingtonia Palm Way #4426  
Ft. Myers, FL 33966

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Jeva Velotta  
10390 Washingtonia Palm Way #4426  
Ft. Myers, FL 33966

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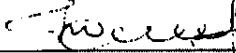
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



\_\_\_\_\_  
Signature/Registered Agent

2/19/08

\_\_\_\_\_  
Date



\_\_\_\_\_  
Signature/Incorporator

2/19/08

\_\_\_\_\_  
Date

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DIVISION OF CORPORATIONS  
08 FEB 19 PM 2:14