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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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FLORIDA PROFIT/NON PROFIT CORPORATION

valley produce corp.

Certificate of Status	0
Certified Copy	1
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DIVISION OF CORPORATION

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Corporate Filing Menu

Help

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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:

Valley Produce Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
1201 NW 23 STREET MIAMI FL 33142

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY UNLAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 PER VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MANUEL LOPEZ PRESIDENT/TREASURER
VICE-PRESIDENT 8533 SW 133 PLACE
MIAMI FLORIDA 33183

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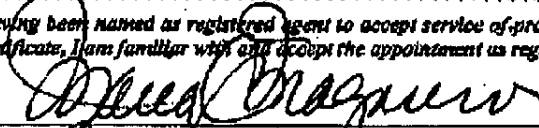
ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
MARIA C MAGARINO 1450 CORAL WAY SUITE 5 MIAMI FL 33145

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
MANUEL LOPEZ 8533 SW 133 PLACE MIAMI FL 33183

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



Signature/Incorporator

03/01/08

Date

03/01/08

Date

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