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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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(Business Entity Name)				
(Document Number).				
(Social Manual).				
Certified Copies Certificates of Status 1				
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COVER LETTER

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

SUBJECT:	VAIva Enterprises, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70.00 Filing Fee	(2) \$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:		non Alvarez (Printed or typed)	
	2940 S Biscayne Dr. Address		
	North Port, FL 34287 City, State & Zip		
* ·		-426-2996 Telephone number	

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

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:

VAlva Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

2940 S Biscayne Dr. North Port, FL 34287

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Vernon Alvarez, President 2940 S Biscayne Dr. North Port, FL 34287

ARTICLE VI REGISTERED AGENT

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

Corporation Service Company 1201 Hays Street Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Vernon Alvarez 2940 S Biscayne Dr. North Port, FL 34287

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.

Certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Lamont W. Jones, Assistant VP

Signature/Registered Agent

Date

Oct 14-09

Date

