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Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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COVER LETTER

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

SUBJECT: VM Commerce, Inc.		
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
	L	
FROM: Igor Salapura	(Printed or typed)	
4044 W. Lake Mary Blvd	. Unit # 273 Address	
Lake Mary, FL 32746 City,	State & Zip	
407-745-1828 Daytime T	elephone number	
isalapura@gmail.com E-mail address: (to be used	d for future annual repor	t notification)

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)

The name of the o	NAME VM Commerce, Inc.			
ARTICLE II	PRINCIPAL OFFICE			
	Principal street address		Mailing address, if different is:	
	4044 W. Lake Mary Blvd. Unit 273			
	Lake Mary, FL 32746			
	USA			
ARTICLE III				
	which the corporation is organized is:			
Any and all	lawful business		TO THAN	
) Lin	
			TO TO	
			183	
			**************************************	•
ARTICLE IV	SHARES			•
	ares of stock is 5000		જેક 😁	
			-, di	
	INITIAL OFFICERS AND/OR DIRECTORS		ري ان	
	Title: Igor Salapura - President	Name and Titl	le: Julijana Salapura - Director	270
Address:	4044 W. Lake Mary Blvd. Unit # 273	Address:	4044 W. Lake Mary Blvd. Unit # 2	2/3
	Lake Mary, FL 32746	•	Lake Mary, FL 32746	
	USA		USA	
Name and	Title:	Name and Tit	le·	
Address:		Address:		
Addiess.				
Name and	Title:	Name and Tit		
Address:		Address:		
		•		
		•		
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of	the registered no	ant in	
Name:	Igor Salapura	me registered ag	gent is.	
Address:	4044 W. Lake Mary Blvd. Unit # 27	73		
riddiess.	Lake Mary, FL 32746	. 5		
	<u> </u>			
	INCORPORATOR			
	Idress of the Incorporator is:			
Name:	Igor Salapura	_		
Address:	4044 W. Lake Mary Blvd. Unit # 27: Lake Mary, FL 32746	3		
Havina bass no	and as resistant as set to assent somilar of process	Con the above o	stated comparation at the place designated in	
	ned as registered agent to accept service of process am familiar with and accept the appointment as regis			
		stereu ugent unt	a ugree to act in this capacity	
Day	1 Solonuma 1		3/15/2011	
	Salapura Required Signature/Registered Agent		3/15/2011	
V	required signature/registered Agent		Date	
	rument and affirm that the facts stated herein are i			
document to the	Department of State constitutes a third degree felony			
u	Salanuse Required Signature/Incorporator		2/15/2011	
Sgov	Jalapura		3/15/2011	
_	Required Signature/Incorporator		Date	