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PICK-UP WAIT MAIL			
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COVER LETTER

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

SUBJECT: VASI Corp.			
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u> I	LUDE SUFFIX)	
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:	
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
	ADDITIONAL C	OPY REQUIRED	
FROM: Victoria J. Karins	(Printed or typed)		
2017 Fiesta Drive			
Sarasota, FL 34231	ddress State & Zip		
941-927-2708 Daytime Te	elephone number		
victoria@viklaw.com E-mail address: (to be used	for future annual report	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)

ARTICLE 1 No.	AME VASI Corp.		
201	RINCIPAL OFFICE Principal <u>street</u> address 7 Fiesta Drive asota, FL 34231		Mailing address, if different is:
Any and all law	h the corporation is organized is: ful business		TALLAHASSEE.
The number of shares	of stock is:1000		PSTATE FLORI
	<u>IITIAL OFFICERS AND/OR DIRECTO</u>		OF THE PERSON OF
	Victoria J. Karins - Director		
	2017 Fiesta Drive		560 79th St. S.
	Sarasota, FL 34231	<u> </u>	St. Petersburg, FL 33707
Name and Title: Address:			e:
Name and Title: Address:			e:
4 D. W. C. L. D. L. W. D. L. W. L. W	TOTOMANDA ANALYS	_	
	GISTERED AGENT	Cal ta I	. •
Name:	a street address (P.O. Box NOT acceptable)		ent is:
Address:	Victoria J. Karins		
Address:	2017 Fiesta Drive	_	
	Sarasota, FL 34231		
ARTICLE VII IN	CORPORATOR		
	s of the Incorporator is:		
Name:	Victoria J. Karins		
Address:	2017 Fiesta Drive Sarasota, FL 34231	_	
	ns registered agent to accept service of proce miliar with and accept the appointment as re		
Walne	1		11/1/2011
	Required Signature/Registered Agent		Date
I submit this document document to the Depart	nt and affirm that the facts stated herein are	e true. I am awar ny as provided for	e that the false information submitted in a in s.817.155, F.S.
1/. /		- -	. / /
1/1/Plant	100		11/1/2011
1	Required Signature/Incorporator		Date