

PI 2000032665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

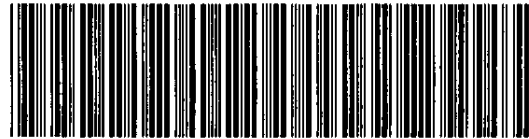
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

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2012 JUN -8 PM 1:18  
TALLAHASSEE, FLORIDA

J. Shivers JUN 11 2012

**COVER LETTER**

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

**SUBJECT: Virtual Gem 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

☒ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

**FROM: NANCY GRECO**

Name (Printed or typed)

**10097 CLEARY BLVD, SUITE 142**

Address

**PLANTATION, FL 33324**

City, State & Zip

**754-300-2468**

Daytime Telephone number

**NGRECO@VIRTUAL-GEM.COM**

E-mail address: (to be used for future annual report notification)

DEPARTMENT OF  
TALLAHASSEE, FLORIDA

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**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**

Virtual Gem, Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
10097 CLEARY BLVD  
SUITE 142  
PLANTATION, FL 33324

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide administrative and specialized business services to small growing companies.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title:	NANCY GRECO, PRESIDENT	Name and Title:	
Address:	10097 CLEARY BLVD	Address:	
	SUITE 142		
	PLANTATION, FL 33324		

Name and Title:		Name and Title:	
Address:		Address:	

Name and Title:		Name and Title:	
Address:		Address:	

**ARTICLE VI REGISTERED AGENT**

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

Name: NANCY GRECO  
Address: 9927 NW 6TH COURT  
PLANTATION, FL 33324

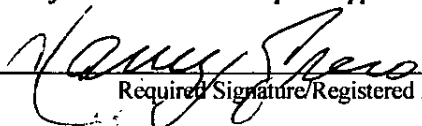
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: NANCY GRECO  
Address: 9927 NW 6TH COURT  
PLANTATION, FL 33324

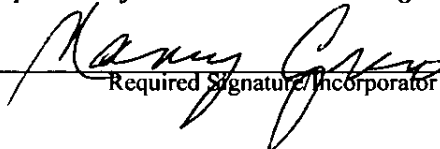
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TALLAHASSEE, FLORIDA

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

  
Required Signature/Registered Agent

6/4/2012  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
Required Signature/Incorporator

6/4/2012  
Date