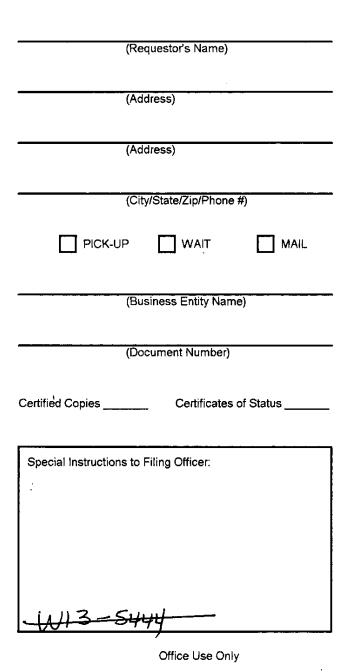
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## **COVER LETTER**

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

SUBJECT: VMP Group I	C. TE NAME - <u>MUST INCLUDE SUFFIX</u> )
(PROPOSED CORPORA	TE NAME - <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the artic	eles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Velma Palr Name	NEY (Printed or typed)
59105W G	2STddress
~ M · · —	33143 State & Zip
305-666- Daytime Te	7540 Elephone number
aspiration 302 E-mail address: (to be used	@ gmail . Com for future annual report notification)

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



January 28, 2013

VELMA PALMER 5910 SW 62 ST MIAMI, FL 33143

SUBJECT: VMP GROUP INC. Ref. Number: W13000005444

We have received your document for VMP GROUP INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the name of the Corporation in Article I.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 813A00002087

## ARTICLES OF INCORPORATION

•	In compliance with Chapter 607 and		),
ARTICLE I NAM	VMP Group:	Inc. Fl	LED
The name of the corporation			_0_nu
•		וט ונט	-8 PM 1: 31
	CIPAL OFFICE	TEST	fress, if different is:
	Principal <u>street</u> address 10 SW 62ST	5910 5 CU	Co.21ST
Nic	mi H 33143	Miami:	7 33143
	,		
ARTICLE III PURF	POSE		
The purpose for which th	e corporation is organized is:		
A business	for wordt		
A court of	Ter pragn.		
	,		
	·		
ARTICLE IV SHALL The number of shares of s			
The number of shares of s	tock is: 200		
	IAL OFFICERS AND/OR DIRECTOR	<del></del>	
Name and Title:	elma talmer	_	<u> </u>
Address:	1910 8W 6157 Viam F1 33143	Address:	
-	1114114 11 58142	<del> </del>	
	Nolly DI am		
Name and Title:	Vlatthew falmer	Addrone	
	niami #3343	Audress.	
<del>/-</del>	<u> </u>		
3.1 179541		M 4 7724	
Name and Title:	and the second s	A delegano	
rudioss.			
		<del></del>	
ARTICLE VI REGI	ISTERED AGENT		•
	reet address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	Velma Palmer		
Address:	5910 SW 625T	_	
-	Miam F1 33143	<u>.</u>	
ARTICLE VII INCO	DRPORATOR		
The name and address o	f the Incorporator is		
Name:	Velma Halmer	<del>_</del>	
Address:	5919 SW 62 ST	_	
-	1110mi +1 55145	_	
	egistered agent to accept service of proces		
this certificate, I am fami	liar with and accept the appointment as re	gistered agent and agree to ac	t in this capacity
$\mathcal{N}_{\mathcal{O}}$			1/22/12
1 Jema	talmer	<del></del>	1/23/13
	Required Signature/Registered Agent		l / Date
	and affirm that the facts stated h <mark>ere</mark> in are		
	ent of State constitutes a third degree felor		
Velma			1/22/13
rema	Required Signature/Incorporator	· · · · · · · · · · · · · · · · · · ·	Note
	reonnen Sikhanare/Higordolami		, ,,,,,,,,,