

DEC/03/2013/TUE 01:42 PM

FAX No.

P. 001

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : I20000000146  
Phone : (305) 444-4994  
Fax Number : (305) 444-4977

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
VILORIA BLANCO GALLERY INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED  
13 DEC -3 PM12:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

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FAX No.

P. 002  
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DIVISION OF CORPORATIONS

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

13 DEC -3 PM 12:55

**ARTICLE I NAME**

The name of the corporation shall be:

**VILORIA BLANCO GALLERY INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

**1000 PONCE DE LEON BLVD**

**STE: 105**

**CORAL GABLES, FL 33134**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ANY AND ALL LAWFUL BUSINESS**

EXPIRATION DATE **1-14-13**

**ARTICLE IV SHARES**

The number of shares of stock is:

**SHARES: 100**

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

Name and Title: **ARSEN R. WANNISSIAN (P/D)**

Name and Title: \_\_\_\_\_

Address

**1000 PONCE DE LEON BLVD**

Address: \_\_\_\_\_

**STE: 105**

**CORAL GABLES, FL 33134**

Name and Title: **CESAR A. VILORIA (V/D)**

Name and Title: \_\_\_\_\_

Address

**1000 PONCE DE LEON BLVD**

Address: \_\_\_\_\_

**STE: 105**

**CORAL GABLES, FL 33134**

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address

Address: \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

(cont.)

13 DEC -3 PM 12:55

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: EXPRESS CORPORATE FILING SERVICE INC.  
Address: 1000 PONCE DE LEON BLVD STE 105  
CORAL GABLES, FL 33134

**ARTICLE VII INCORPORATOR**

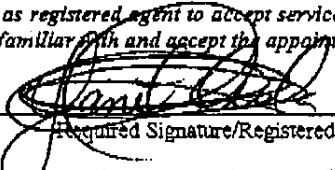
The name and address of the Incorporator is:

Name: ARSEN R. WANNISSIAN  
Address: 1000 PONCE DE LEON BLVD STE: 105  
CORAL GABLES, FL 33134

ARTICLE VIII - EFFECTIVE DATE


JANUARY 01, 2014

*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

12/03/13  
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 §.817.155, F.S.*

  
\_\_\_\_\_  
Required Signature/Incorporator

12/03/13  
Date