

P14000023732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

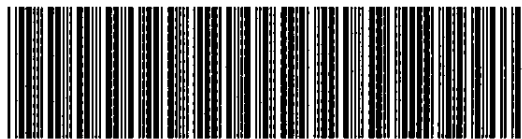
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
2014 MAR 13 PM 2:27

174

COVER LETTER

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

SUBJECT: VM TECHNOLOGIES, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: VICTOR M NUNEZ

Name (Printed or typed)

5307 NW 7TH STREET APT 5

Address

MIAMI, FLORIDA 33126

City, State & Zip

786-879-4812

Daytime Telephone number

VMTECHNOLOGIES@OUTLOOK.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)

MAILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: VM TECHNOLOGIES, INC

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5307 NW 7TH STREET

Apt 5

MIAMI, FLORIDA 33126

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: VICTOR M NUNEZ P Name and Title: _____

Address 5307 NW 7TH STREET Address: _____

APT 5

MIAMI, FLORIDA 330126

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED (cont.)
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2014 MAR 13 PM 2:27

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:

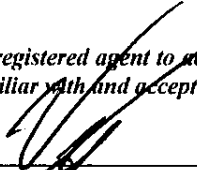
Name: VICTOR M NUNEZ
Address: 5307 NW 7TH STREET APT 5
MIAMI, FLORIDA 33126

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: VICTOR M NUNEZ
Address: 5307 NW 7TH STREET APT 5
MIAMI, FLORIDA 33126

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

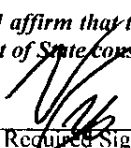


Required Signature/Registered Agent

03/10/2014

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

03/10/2014

Date