

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : FASTKIT CORP  
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14 APR 16 PM 2:07

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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14 APR 16 PM 4:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION  
VIDA VITAL CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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B 4/17/14

ARTICLE OF INCORPORATION

OF

VIDA VITAL CORP.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: VIDA VITAL CORP.

The principal place of business of this corporation shall be:

16420 NE. 5 th.AVE.  
MIAMI, FL. 33162

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory, or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 x \$ 10.00 = \$ 1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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DIVISION OF CORPORATIONS  
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## ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

FERNANDO QUIROZ  
16490 NE. 5 AVE.  
MIAMI, FL. 33162

**DIRECTOR**

ALICIA QUIROZ  
16490 NE. 5 AVE.  
MIAMI, FL. 33162

**DIRECTOR**

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

FERNANDO QUIROZ  
16490 NE. 5 AVE.  
MIAMI, FL. 33162

PRESIDENT ( 50 shares)

ALICIA QUIROZ  
16490 NE. 5 AVE.  
MIAMI, FL. 33162

VICE-PRESIDENT ( 50 shares )

The undersigned has (have) executed these Articles of Incorporation this 15 th day of April, 2014.

~~Signature/Title~~

Signature/Title

Signature/Title

14 APR 16 PM 2:07

SECRETARY OF STATE  
DIVISION OF CONGRESSIONAL AFFAIRS

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: \_\_\_\_\_

\_\_\_\_\_  
VIDA VITAL CORP.

2. The name and address of the registered agent and office

is \_\_\_\_\_  
FERNANDO QUIROZ  
(Name)

\_\_\_\_\_  
16490 NE. 5 AVE.

\_\_\_\_\_  
(P. O. BOX NOT ACCEPTABLE)

\_\_\_\_\_  
MIAMI, FL. 33162

\_\_\_\_\_  
(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MY POSITION AS REGISTERED AGENT.

SIGNATURE \_\_\_\_\_

DATE 4-15-14 \_\_\_\_\_

14 APR 16 PM 2:08  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS