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Florida Department of State
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FLORIDA PROFIT/NON PROFIT CORPORATION
VIDA HEALTH EXPRESS INC.

Certificate of Status	0
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Vida Health Express Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address:
6001 NW 153 Street #140
Miami Lakes, Florida 33014

Mailing address, if different is:

ARTICLE III PURPOSE Sales
The purpose for which the corporation is organized is:

ARTICLE IV SHARES 100,000,000
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anthony Melendez (P)
Address: 4620 NE 15th Avenue, Pompano Beach, Florida 33064

Name and Title: Adriana Montalvo (VP)
Address: 18365 NE 30th Place, Aventura, Florida 33160

Name and Title:
Address

Name and Title:
Address

Name and Title:
Address

Name and Title:
Address

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(cont.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ _____

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ARTICLE VI REGISTERED AGENT

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

Name: Michael Montalvo

Address: 18365 NE 30th Place

Aventura, Florida 33160

ARTICLE VII INCORPORATOR

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

Name: Anthony MELENDEZ

Address: 4620 N.E. 15th Avenue

Pompano Beach, FL 33064

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

_____ 2/11/15

Required Signature/Registered Agent — 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.

_____ 2/11/15

Required Signature/Incorporator — Date