

P/S 000043/05

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 : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

RECEIVED

15 MAY 13 PM 1:00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

****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

Vidaris of Florida, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

K 05/14/15

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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Electronic Filing Menu

Corporate Filing Menu

Help

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

ARTICLE I NAME

The name of the corporation shall be: Vidaris of Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

360 Park Avenue South, 15th Floor

New York, NY 10010

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

to engage in any lawful act or activity for which corporations may be organized under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marc Weissbach, Director, President

Address: 360 Park Avenue South, 15th Floor
New York, NY 10010

Name and Title: Robert Vecchio, Director

Address: 360 Park Avenue South, 15th Floor
New York, NY 10010

Name and Title: R. Scott Schaffer, Director

Address: 200 Park Avenue, 20th Floor
New York, NY 10166

Name and Title: Jonathan Stein, Director

Address: 200 Park Avenue, 20th Floor
New York, NY 10166

Name and Title: Jeffrey Lipsitz, Director

Address: 200 Park Avenue, 20th Floor
New York, NY 10166

Name and Title: Jeffrey Somerlot, Vice President

Address: 360 Park Avenue South, 15th Floor
New York, NY 10010

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DIVISION OF CORPORATION

5/13/2015 12:33:56 PM From: To: 8506176381(3/3)

(cont.)

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: C T Corporation System
Address: 1200 South Pine Island Road
Plantation, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jonathan Stein
Address: 200 Park Avenue, 20th Floor
New York, NY 10166

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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

By: C T Corporation System *Kristin Boldon*

Required Signature/Registered Agent Kristin Boldon
Assistant Secretary

May 13, 2015

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.

Jonathan Stein

Required Signature/Incorporator
Jonathan Stein

May 13, 2015

Date