

04/19/2033

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**FLORIDA PROFIT/NON PROFIT CORPORATION
GVM DISTRIBUTION SERVICES INC.**

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

RECEIVED

15 JUN -8 PM 4:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
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15 JUN -8 AM 10:41

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AND
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04/19/2033 06:23

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H 15000130020

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

15 JUN -8 AM 10:41

ARTICLE I NAME
The name of the corporation shall be: GVM DISTRIBUTION SERVICES INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE
Principal street address
15465 SW 36 TERRACE
MIAMI FL 33185

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: DISTRIBUTION OF GOODS

ARTICLE IV SHARES
The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YULICED GARRIGA /PRESIDENT
Address: 15465 SW 36 TERRACE
MIAMI FL 33185

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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Name and Title: _____	Name and Title: SECRETARY OF STATE
Address: _____	TALLAHASSEE, FLORIDA
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: YULICED GARRIGA
 Address: 15465 SW 36 TERRACE
 MIAMI FL 33185

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: YULICED GARRIGA
 Address: 15465 SW 36 TERRACE
 MIAMI FL 33185

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 06/08/15 (OPTIONAL)
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

[Signature]
 Required Signature/Registered Agent

05/15/15 06/08/15
 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.

[Signature]
 Required Signature/Incorporator

05/15/15 06/08/15
 Date

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