

NOV/12/2015/THU 11:54

11/12/2015

P. 001

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Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
VIRAM MANAGEMENT CORP

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

STATE OF FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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P. 002

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: VIRAM MANAGEMENT CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1930 SW 21ST STREET

PO BOX 450980

MIAMI, FL 33145

MIAMI, FL 33245

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BENJAMIN MATOS (P)

Name and Title: _____

Address 1930 SW 21ST STREET

Address: _____

MIAMI, FL 33145

Name and Title: ELVIRA MATOS (V/P)

Name and Title: _____

Address 1930 SW 21ST STREET

Address: _____

MIAMI, FL 33145

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: BENJAMIN MATOS
Address: 1930 SW 21ST STREET
MIAMI, FL 33145

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BENJAMIN MATOS
Address: 1930 SW 21ST STREET
MIAMI, FL 33145

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

Ben Matos
Required Signature/Registered Agent

11/11/2015
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.

Ben Matos
Required Signature/Incorporator

11/11/2015
Date