

P17 000033381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

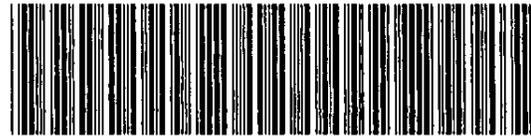
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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04/11/17--01002--002 **78.75

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17 APR 11 PM 12:59
STATE OF FLORIDA
ALLIANCE FOR FLORIDA

T. BURCH
APR 12 2017

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: VANI II, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Chi-Te Liu
Name (Printed or typed)

9840 SW 23rd Ter
Address

Miami, FL 33165
City, State & Zip

(305) 299-0972
Daytime Telephone number

cliu58888@gmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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: VANI II, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address: 9840 SW 23rd Terr
Miami, FL 33165

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Engage Trading Business.
dry goods, seeds, etc.

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MICHIGAN SECRETARY OF STATE

ARTICLE IV SHARES

The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Chi-Te Liu President</u>	Name and Title:	<u>Maria V. Quintana-Liu CCFD</u>
Address:	<u>9840 SW 23rd Terr</u> <u>Miami, FL 33165</u>	Address:	<u>9840 SW 23rd Terr</u> <u>Miami, FL 33165</u>

Name and Title:	<u>N/A</u>	Name and Title:	<u>N/A</u>
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Address:	_____	Address:	_____
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Name and Title:	<u>N/A</u>	Name and Title:	<u>N/A</u>
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Address:	_____	Address:	_____
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Name and Title: N/A Name and Title: N/A
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Chi-Te Liu
 Address: 9840 SW 23rd Terr
Miami, FL 33165

ARTICLE VII INCORPORATOR

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

Name: Chi-Te Liu
 Address: 9840 SW 23rd Terr
Miami, FL 33165

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 DEPARTMENT OF STATE
 ALBANY, FLORIDA

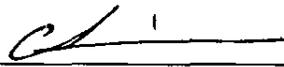
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/05/2017 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

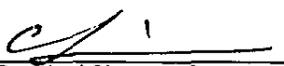
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


 Required Signature/Registered Agent

04/05/2017
 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.


 Required Signature/Incorporator

04/05/2017
 Date