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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019 : (305)552-5973 Phone

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FLORIDA PROFIT/NON PROFIT CORPORATION VALI INVESTMENTS INC. Certificate of Status 1 Certified Copy 04 Page Count \$78.75 Estimated Charge

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Help

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Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of VALI INVESTMENTS IN Of Doc# P1400023170 are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it. Thank you for your help in this matter.

Very Sincerely,

Amaldo Valido

H17000322613

In compliance with Chapter 607 (Profit)

EFFECTIVE DATE 1/1/18

ARTICLE I NAME: The name of the corporation is:		
VALI INVESTMENTS INC.		
ARTICLE II PRINCIPAL OFFICE;		
The principal street address and mailing address is:		
5450 SW 156 PL		
Migmi FL 33185		
ARTICLE III SHARES: The number of shares of stock is: 100		
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
ARNALDO VALIDO (P)		
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SET 8		
7		
 		
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:		
The name and Florida street address (PO Box not acceptable) of the registered agent is:		
ARNALDO VALIDO		
5450 SW 156 PL		
Miami FL 33185		
and the Incorporator is:		
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:		
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Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.

HRNALDO VALIDO
Typed or printed name of signee

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of ray duties, and the provisions of all statutes relating to the proper and complete performance of ray duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)