

**Electronic Articles of Incorporation
For**

P18000058261
FILED
July 02, 2018
Sec. Of State
cmwood

MVICTOR ARTS GALLERY INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

MVICTOR ARTS GALLERY INC

Article II

The principal place of business address:

4101 N. ANDREWS AVE.
301
OAKLAND PARK, FL. US 33309

The mailing address of the corporation is:

4101 N. ANDREWS AVE.
301
OAKLAND PARK, FL. US 33309

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

01

Article V

The name and Florida street address of the registered agent is:

VICTOR D MALCA
721 N PINE ISLAND RD.
403
PLANTATION, FL. 33324

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: VICTOR MALCA

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Article VI

The name and address of the incorporator is:

VICTOR MALCA
721 N PINE ISLAND RD.
403
PLANTATION FL 33324

Electronic Signature of Incorporator: VICTOR MALCA

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
VICTOR D MALCA
721 N PINE ISLAND RD, #403
PLANTATION, FL. 33324 US

Article VIII

The effective date for this corporation shall be:

07/01/2018

#P18000058261

Victor Malca
721 N Pine Island Road
Apartment 403
Plantation, FL 33324
Cell: (305) 798-2211
Office: (954) 474-0556

July 16, 2018

Via USPS overnight priority mail.

Sammy Caldwell
Clifton Building
2661 Executive Center Cir W,
Tallahassee, FL 32301

RE: MVictor Arts Gallery Inc.
Filed on July 2, 2018
File Number: P18000058261

Dear Mr. Caldwell:

This letter is to confirm our conversation on July 16, 2018 at which time I informed you that the articles of incorporation file number P18000058261 on July 2, 2018 corresponding to the company named MVictor Arts Gallery Inc was filed without my consent or knowledge. Attached is a copy of a recent bill from Universal Property and Casualty Insurance Company which it indicates my name Victor Malca, my address 721 N Pine Island Road Apartment 403 Plantation, FL 33324 and my cell number (305) 798-2211. You can contact me at my office number at (954) 474-0556. Attached is a copy of the Articles of Incorporation filed.

If you require any other information, please contact me at your earliest convenience.

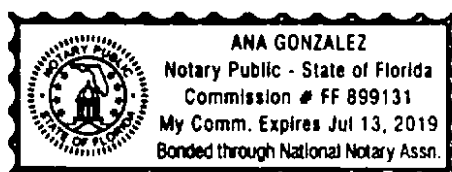
Yours very truly,
Victor Malca
Victor Malca


SWORN TO AND SUBSCRIBED before me this 16 day of July
2018 by **Victor Malca**, who is personally known to me and who did take an oath.

Ana Gonzalez

Notary Public, State of Florida
At Large

My Commission Expires:



Universal Property & Casualty Insurance Company c/o Universal Risk Advisors 1110 W. Commercial Blvd Suite 300 Fort Lauderdale, FL 33309 Toll Free: 800-425-9113	Homeowners Declaration Effective 08/17/2017 Renewal Policy	
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Claims: 800-218-3206			Service: Contact your Agent Listed Below	
Policy Number	FROM	Policy Period	TO	[INSURED BILLED]
1503-1602-4321	08/17/2017	08/17/2018		12:01 AM Standard Time
				Agent Code AC25

Named Insured and Address Victor Malca 721 N Pine Island Road # 403 Plantation, FL 33324 (305) 798-2211	Agent Name and Address JGI Holdings, LLC. 6300 NW 5th Way #100 Fort Lauderdale, FL 33309 (954) 281-7070
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Premium Summary								
Basic Coverages Premium	Attached Endorsements Premium		Assessments / Surcharges		MGA Fees/Policy Fees		Total Policy Premium (Including Assessments & Surcharges)	
\$914.00	\$156.00		\$184.00		\$27.00		\$1,281.00	
Location 001								
Form	Construction	Year	Townhouse/ Rowhouse	Number of Families	Occupied	Protection Class	Territory	BCEG
HO6	Masonry	1991	N	1	Y	3	38	99
Protective Device Credits:								
County	Dwelling Replacement Cost		Home Updated		Burglar	Fire	Sprinkler	Shutter
Palm Beach	Y		Y		None	None	N	N
								Wind / Hail Exclusion
								N

We will provide the insurance described in this policy in return for the premium and compliance with all applicable provisions of this policy. If we elect to continue this insurance, we will renew this policy if you pay the required renewal premium for each successive policy period subject to our premiums, rules and forms then in effect. You must pay us prior to the end of the current policy period or else this policy will expire.

Insurance is provided only with respect to the following coverages for which a limit of liability is specified, subject to all the conditions of this policy.

COVERAGES - SECTION I	LIMITS	PREMIUMS	COVERAGES - SECTION II	LIMITS	PREMIUMS
Coverage -A- Dwelling	\$50,000		Coverage -E- Personal Liability	\$300,000	\$18 00
Coverage -B- Other Structure	\$0		Coverage -F- Medical Payments	\$3,000	\$5.00
Coverage -C- Personal Property	\$6,000	\$914.00			
Coverage -D- Loss of Use	\$2,400				

NOTE: The portion of your premium for hurricane coverage is: \$530.85
The portion of your premium for all other coverages is: \$750.15

Section 1 coverages subject to a minimum \$500 hurricane deductible per calendar year.
Section 1 coverages subject to \$1,000 non-hurricane deductible per loss.

DESCRIBED LOCATION - The Described Location covered by this policy is at the above address unless otherwise stated:
1089 BENOIST FARMS RD APARTMENT 206 WEST PALM BEACH, FL 33411

THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

Flood coverage is not provided by Universal Property and Casualty Insurance Company and is not part of this policy.

Countersignature	Date	 Chief Executive Officer
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