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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : TRAMILEX LLC Account Number : I20150000056 : (786)469-9163 Fax Number : (305)843-3716

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION VDW SERVICES CORP

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COVER LETTER

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

SUBJECT:

VDW SERVICES CORP

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Enclosed are an only	ginal and one (1) copy of the ar	ncies of incorporation and	1 & Check for:	
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status	
				
FROM:	POMARIO OBREGON TORRES Name (Printed or typed) 9220 FONTAINEBLEAU BLVD APT 512			
	Address			
М	AMI, FL 33172			
	City, Stare & Zip			
(30	5)900-5125			
	Daytime Telephone number			
	E-mail address: (to be use	ed for future annual report i	notification)	

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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)

TICLE IV SHARES purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS TICLE IV SHARES number of shares of stock is: Name and Title: ROMARIO OBREGON TORRES. P Name and Title: 9220 FONTAINEBLEAU BLVD APT 512 Address MIAMI, FL 33172	TOTETT BOING	TRAL OFFICE		
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Name ar	nd Title:	Wanne and Tine:	
Address	s	Address:	
		_	
ARTICLE VI The name and F	REGISTERED AGENT Morida street address (P.O. Box NOT acceptable) o	of the registered agent is	:
Name:	ROMARIO OBREGON TORRES	_	
Address:	9220 FONTAINEBLEAU BLVD APT 512		
	MIAMI, FL 33172	- -	
<u>ARTICLE VII</u>	INCORPORATOR		
The name and s	address of the Incorporator is:		
Name:	ERIK GONZALEZ		
Address:	8660 W FLAGLER ST STE 207	_	
	MIAMI, FL 33144	_	
Effective date, i	EFFECTIVE DATE: 1 other than the date of filing: 2 date is listed, the date must be specific and cann filing.)	. (OPTIC ot be more than five I	
Note: If the da	te inserted in this block does not meet the applicable effective date on the Department of State's records.		ements, this date will not be listed as
Having been no this certificate,	nmed as registered agent to accept service of process I am familiar with and accept the appointment as re	ss for the above stated egistered agent and agr	corporation at the place designated is see to act in this capacity
k	Le Comple		05/15/2019
	Required Signature/Registered Agent	· ··	Date
	ocument and affirm that the facts stated herein an e Department of State constitutes a third degree felo		
	a.6(2)		05/15/2019
Req	uired Signature Incorporator	<u> </u>	Date