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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : Vcorp SERVICES, LLC
Account Number : I20080000067
Phone : (845)425-0077
Fax Number : (845)818-3588

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

Email Address: statenotices@vcorp-services.com

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FLORIDA PROFIT/NON PROFIT CORPORATION
Salvador Management, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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2019 JUL -5 PM 2:57

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Corporate Filing Menu

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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: Salvador Management, Inc.

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is

1521 Burgess Ct

Melbourne, FL 32935

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Management company

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Aaron Iglesias Salvador, President

Name and Title:

Address

1521 Burgess Ct

Address:

Melbourne, FL 32935

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:	Vcorp Services, LLC
Address:	5011 South State Road 7, Suite 106
	Davie, FL 33314

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name:	Melissa Zanoletti
Address:	25 Robert Pitt Dr., Suite 204
	Monsey, NY 10952

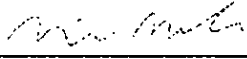
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ARTICLE VIII EFFECTIVE DATE:

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 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

	Miriam Nachison, Assistant Secretary	07/03/2019
Required Signature/Registered Agent		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.

	Melissa Zanoletti	07/03/2019
Required Signature/Incorporator		Date