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Florida Department of State
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**FLORIDA PROFIT/NON PROFIT CORPORATION
V.A.P INSURANCE SERVICES CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2ND REQUESTS

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:V.A.P Insurance Services Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:


16385 biscayne blvd apt 2804 north miami beach florida 33160**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Valeria Popova PresidentRoberto De Las Salas Vice President**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Valeria Popova16385 biscayne blvd apt 2804 north miami beach florida 33160**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Valeria PopovaRoberto De Las Salas16385 biscayne blvd apt 2804 north miami beach florida 33160


Required Signatures:

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

Valeriia Popova 

Registered Agent Date 11/08/2019

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.

Valeriia Popova 

Incorporator Date 11/08/2019