

9/30/2020

Division of Corporations

P20000076308

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
VIVANCO TOWING INC

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

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Corporate Filing Menu

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2020 SEP 30 AM 11:00

2020 SEP 30 PM 1:32

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: VIVANCO TOWING INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

277 E 63 STHIALEAH, FL 33013**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: EDUARDO SUAREZ VIVANCO (P)

Name and Title: _____

Address 277 E 63 ST

Address: _____

HIALEAH, FL 33013

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2020 SEP 30 AM 11:00
STATE OF FLORIDA
HIALEAH, FL

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: EDUARDO SUAREZ VIVANCO
Address: 277 E 63 ST
HIALEAH, FL 33013

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: EDUARDO SUAREZ VIVANCO
Address: 277 E 63 ST
HIALEAH, FL 33013

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

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.

Required Signature/Incorporator

Date

FILED
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HIALEAH, FL
STATE