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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

C	Address:		
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FLORIDA PROFIT/NON PROFIT CORPORATION VCI ENTERPRISE, INC.

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

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

,
VCI Enterprise, INC
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
2545 Sw 20th St 33145, Miami
I-L
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Daniella Maggie Padriguez (Dresident)
ADTICLE V INCOME.
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:
Daniella Margie Podriquez
-2545 SW 2040 St 33145 Migmi FL
ADTICITY INCORPORTED T
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: Daniella Maggie Vocaviaue
2545 SW 20th St 33145, Miami Fl.
- 540 SW 611 5 53 110 MIMINI

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

Registered Agent

10/9/20 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.

Incorporator

Date