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**FLORIDA PROFIT/NON PROFIT CORPORATION  
STRATEGIC VISION PARTNERS INC**

Certificate of Status	1
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## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

**STRATEGIC VISION PARTNERS INC**

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1850 S OCEAN DR  
HALLANDALE BEACH, FL 33009

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### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

200 SHARES AT NO PAR VALUE

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

INES HIRECHE VOLONINO  
1850 S OCEAN DR  
HALLANDALE BEACH, FL 33009

Prepared By:

Bruce B. Hubbard

238 W. Jericho Turnpike

Huntington Sta., NY 11746

1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

INES HIRECHE VOLONINO - PRESIDENT / DIRECTOR  
1850 S OCEAN DR, HALLANDALE BEACH, FL 33009

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

INES HIRECHE VOLONINO  
1850 S OCEAN DR, HALLANDALE BEACH, FL 33009

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

18TH day of JUNE 2021

  
INES HIRECHE VOLONINO  
Signature

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE  
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **STRATEGIC VISION PARTNERS INC**

2. The name and address of the registered agent and office is:

**INES HIRECHE VOLONINO**  
Name

**1850 S OCEAN DR**  
(P.O. Box or Mail Drop Box NOT Acceptable)

**HALLANDALE BEACH, FL 33009**  
(City / State / Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

*Ines Hireche Volonino*  
INES HIRECHE VOLONINO  
SIGNATURE

**JUNE 18, 2021**  
(Date)

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