

P22000029521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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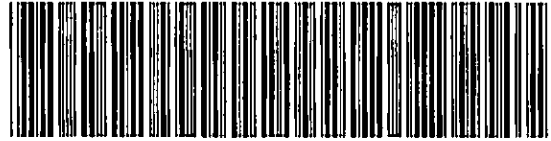
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/01/22--01023--021 **70.00

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2023 APR -1 PM 3:12
TALLAHASSEE, FL

C

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Vivace Dolce Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee.
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Danielle White
Name (Printed or typed)

618 East South St. Suite 500
Address

Orlando FL 32801
City, State & Zip

706-587-3986
Daytime Telephone number

vivacedolcesweet@gmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles

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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: Vivace Dolce Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
618 East South Street
Suite 500
Orlando, FL 32801

Mailing address, if different is:

16202 Barewood Lane
Sanford, FL 32771

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any & all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Danielle White, President Name and Title: _____

Address 16202 Barewood Lane Address: _____

Sanford, FL 32771 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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2023 APR -1 PM 3:13
CLERK OF DISTRICT COURT
JACKSONVILLE, FL

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

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Danielle White
Address: 16202 Barewood Lane
Sanford, FL 32771

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Danielle White
Address: 16202 Barewood Lane
Sanford, FL 32771

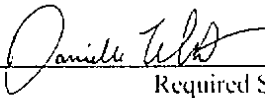
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 03/22/22 (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

 03/21/22
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.

 03/21/22
Required Signature/Incorporator Date

FILED
2023 APR -1 PM 3:03
TALLAHASSEE, FL