

P 22 0000 53320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

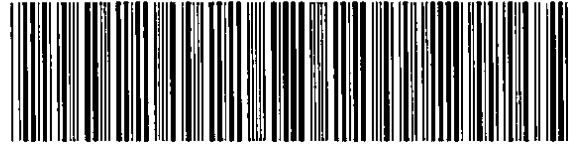
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Office Use Only



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2022 JUL - 1 PM 3:31  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

RECEIVED  
2022 JUL - 1 PM 1:44  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**Sunshine State Corporate Compliance Company**

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 07/01/2022

**\*\*WALK IN\*\***

ENTITY NAME Vigie U.S.A., Inc.

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

\_\_\_\_\_  
XXXXX  
\_\_\_\_\_  
\_\_\_\_\_

*Plain Copy*  
*Certified Copy*  
*Certificate of Status*

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

LED

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Certified Copy of Arts & Amendments*  
*Certificate of Good Standing*

**\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$78.75

ACCOUNT #: I20160000072

*S. B. JHO*

*Please call Tina at the above number for any issues or concerns. Thank you so much!*

COVER LETTER

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

SUBJECT: Vigie U.S.A., 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 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

2022 JUN -1 PM 3:31  
DEPT OF STATE  
CORPORATION DIVISION  
TALLAHASSEE, FLORIDA

FILED

FROM: Joshua Pearce

Name (Printed or typed)

500 West 2nd Street, Suite 1900

Address

Austin, TX 78701

City, State & Zip

512-298-1330

Daytime Telephone number

josh@pearceshambach.com

E-mail address: (to be used for future annual report notification)

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

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: Vigie U.S.A., Inc.

ARTICLE II PRINCIPAL OFFICE  
Principal street address  
500 West 2nd Street, Suite 1900  
Austin, TX 78701

Mailing address, if different is:  
500 West 2nd Street, Suite 1900  
Austin, TX 78701

ARTICLE III PURPOSE  
The purpose for which the corporation is organized is: to engage in any lawful act or activity  
for which corporations may be organized under the Florida Business  
Corporation Act

ARTICLE IV SHARES  
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ibrahim El Sayed, President, Secretary, Treasurer  
Address: 500 West 2nd Street, Suite 1900  
Austin, TX 78701

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: Joshua Pearce, Vice President  
Address: 500 West 2nd Street, Suite 1900  
Austin, TX 78701

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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: Incorporating Services, Ltd.  
Address: 1540 Glenway Drive  
Tallahassee, FL 32301

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Joshua Pearce  
Address: 500 West 2nd Street, Suite 1900  
Austin, TX 78701

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TALLAHASSEE, FLORIDA

**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*

Melissa A. Moreau  
Required Signature/Registered Agent

6/30/22  
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.*

Joshua Pearce  
Required Signature/Incorporator

6/30/22  
Date