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Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 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 **

FLORIDA PROFIT/NON PROFIT CORPORATION VIC PRIME SUPPLY INC.

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

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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

	ARTICLE I NAME: The name of the corporation is:
'C '	rime Supply inc.
•	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is: 2919 W Wilder AVC Tampa FL 33614
Al	RTICLE III SHARES: The number of shares of stock is:
	Victor Howvel lovez Cardenas (P)
	ARTICLE V INITIAL REGISTERED AGENT AND STREET ALDRESS:
T	he name and Florida street address (PO Box not acceptable) of the registered agent is:
	Victor Mane Perez Cardenas
	2919 w wilder AVE
·	Tampa F1 33614
	ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
	<u>victor</u> <u>Manuel</u> <u>perez</u> <u>Cardenas</u>
	2919 W Wilder Ave
	Tamon F1 3344

3052201440

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

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

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