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## CORPORATE ACCESS, \_\_\_\_\_

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INC.

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#### **WALK IN**

	PICK	UP: MISTY 6/15
XX	CERTIFIED COPY	
	РНОТОСОРУ	
	CUS	
XX	FILING	DOMESTICATION
•	VILLAMAGGIORE HOI (CORPORATE NAME AND DOCUM	LDINGS INC.  MENT #)
	(CORPORATE NAME AND DOCUM	IENT #)
	(CORPORATE NAME AND DOCUM	IENT #)
-	(CORPORATE NAME AND DOCUM	1ENT #)
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-	(CORPORATE NAME AND DOCUM	IENT #)
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## Articles of Domestication Foreign Corporation Domesticating to Florida

The u	ndersigned,	Ornella P. Bellafiore Vagnone	Director			
		(Name)	(Title)			
of Vi	llamagg	iore Holdings Inc.		_, a foreign		
	ration, in ac stication.	cordance with s. 607.11922, Florida	Statutes, submit th			
1.	Then nam	e of the domesticating corporation i	, Villamaggior	e Holdings Inc.		
		(Foreign Corporation)				
2.	The jurisd	iction and date of its formation is $\frac{1}{2}$	slands of Nevis,	January 30, 2020		
3.	The name	of the domesticated corporation is	Villamaggiore	Holdings Inc.		
4.	The jurisd	iction of formation of the domestica	ted corporation is F	lorida		
5.						
6.	. Attached are Florida Articles of Incorporation to complete the domestication requirements pursuant to s.607.0202, F.S.					
l certif	fy I am auth	orized to sign these Articles of Dome	estication on behalf ille Lelle fure ed Signature	of the corporation.		
		(Addition2	ea signature)			

### ARTICLES OF INCORPORATION IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME	
THE NAME OF THE CORPORATION SHALL	CBE:
Villamaggiore Holdings Inc.	
ARTICLE II PRINCIPAL OF	PICE
THE PRINCIPAL PLACE OF BUSINESS/ MA	<del></del>
Principal Address	Mailing Address
Doral, Florida 33178	Doral, Florida 33178
ARTICLE III PURPOSE  THE PURPOSE FOR WHICH THE CORPORATION AND LAWFUL BUSINESS.	RATION IS ORGANIZED:
ARTICLE IV SHARES THE NUMBER OF SHARES OF STOCK IS:	100,000
ARTICLE VI REGISTERE	D AGENT AND STREET ADDRESS
THE NAME AND FLORIDA STREET ADD	RESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
Rozencwaig & Nadel, LLP	
301 W. Hallandale Beach Blvd	
Hallandale Beach, FL 33009	, <del>C</del> !
UAMANO DEEN NAMED AS DESCRIPTION	ACRITE AND TO ACCOUNT OPPOSITOR OF PROCESS FOR THE
	D AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE E PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR
	r as registered agent and agree to act in this Ti
11	
Signature/Registered Agent	May 29, 2023 Date
~-B	Date

#### ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: Name & Title: Ornella P. Bellafiore Vagnone Name & Title: President/Director Address: Address: 10932 N.W. 87th Lane Doral, Florida 33178 Name & Title: Rina Vagnone Name & Title: Secretary/Director Address: Address: 10932 N.W. 87th Lane Doral, Florida 33178 Name & Title: Name & Title: Address: Address: Name & Title: Name & Title: Address: Address: I submit this document and affirm that the facts stated herein are true. I am aware that 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. Signature/Authorized Person