Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : I20080000045 Phone : (302)645-7400 : (302)645-1280 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: danghd01@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Vietlist.biz Inc.

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Help

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	t			
The name of the corpo	pration shall be: Vietlist.biz Inc.			
<u>ARTICLE II PRI</u>				
CIALNIA	Principal <u>street</u> address	Mailing ac	ldress, it different is:	
S104 N Orange Blossom Trail, Suite 202 Orlando, FL 32810		516 Stowers Dr New Smyrna Beach, FL 32168		
			 	
ARTICLE III PUR		1.1 1. 1. 1. 1. 1. 1.	3 . 6 . 3	
	h the corporation is organized is: <u>Vietlist</u> .			
primarily for Vie	tnamese users and business owners in	1 the United States and C	lanada.	
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ARTICLE IV SIL	ARES			
	of stock is: 10,000			
ARTICLE V INT	<u> LAL OFFICERS AND/OR DIRECTORS</u>			
		Name and Title:		
Name and T	itle: Hoa Dang Director and CEO	Name and Title:		
	itle: Hoa Dang Director and CEO	. 1 f		
Name and T	itle: Hoa Dang Director and CEO	. 1 f		
Name and T	itle: Hoa Dang Director and CEO 516 Stowers Dr	. 1 f		
Name and T	itle: Hoa Dang Director and CEO 516 Stowers Dr	. 1 f		
Name and T	itle: Hoa Dang Director and CEO 516 Stowers Dr New Smyrna Beach, FL 32168	Address:		
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Name and T Address	itle: Hoa Dang Director and CEO 516 Stowers Dr New Smyrna Beach, FL 32168	Address: Name and Title:		
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Name and Ti Address Name and Ti Address	itle: Hoa Dang Director and CEO 516 Stowers Dr New Smyrna Beach, FL 32168	Name and Title:	2022 St	

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Name and Title:		Name and Title:		
Address		Address:		
ARTICLE VI	_REGISTERED AGENT			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Florida street address (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	Hoa Dang	_		
Address:	516 Stowers Dr			
	New Smyrna Beach, FL 32168	_		
<u>ARTICLE VII</u>	INCORPORATOR			
The name and a	address of the Incorporator is:			
Name:	Hoa Dang	_		
Address:	516 Stowers Dr			
	New Smyrna Beach, FL 32168	_		
Effective date, i	EFFECTIVE DATE: If other than the date of filing: date is listed, the date must be specific and can	. (OPTIONAL) not be more than five days prio	er or 90 days af	ter the
	te inserted in this block does not meet the applicable effective date on the Department of State's record		his date will no	t be listed as
	med as registered agent to accept service of process familiar with and accept the appointment as regist	•		gnated in this
	Required Signature/Registered Agent		Date	:
	reument and affirm that the facts stated herein a e Department of State constitutes a third degree felo			ubmitted in a
	R		<u>₹</u> 08.28. 20 23	202
Required Signal	ture/Incorporator	Date	00.20.2025	
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