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COVER LETTER

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

SUBJECT: VICE Society INC				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	lacheck for:	
₩\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
		e (Printed or typed)		
_ {	515 W. Madison	St #120 Address		
To	xllatassee, FL 3 city.	230 4 State & Zip		
	850 · 841 · 04	173 Telephone number		
	E-mail address: (to be use	habis. (D) d for future annual report i	notification)	

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

9 15 1 5 5	Principal street address	Mailing addre	ess, if different is:
TICLE III - PUR.	ordison of #170 Se, Fu 32304 POSE	- la a . s . C	- A`I
purpose for which	the corporation is organized is:	TOWNERS TO	profit
		· ,	
RTICLE IV SHA	RES of stock is: 1000		
tumoet of shares of	71 SIDEK IS / V U V		
	the Kashan William S	O Name and Title:	
Address	16: Kaylyn Williams St. # 170	Address:	1.1
	Tallahassee, P. 32304		
Name and Tit	10: Dustin Nelson CFO	Name and Title:	
Address	815 W. Madison 8# 120	Address:	
	Fullahassee, R 32304		
	- , ,		
Name and Tit	10: Tiffons Little COO	Name and Title:	£3
	10: Tiffony Little COO 815 W. Madison Sitt 170	Name and Title:	28%
Name and Tit Address	815 W. madison Sith 120	Address:	2865
	E15 W madison Sit 120 Tallahassee, Fl. 32304	Address:	2000

·		
Name and	Title:	Name and Title:
Address		Address:
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable) o	f the registered agent is:
	Tifformy withle	_
Address:	815 W. Madison St #120	_
	Talluhassee, 12.32304	_
<u>ARTICLE VII - II</u>		
The name and add	ress of the Incorporator is:	
Name:	Tiffany Withk	-
Address:	Tiffany little 815 W. Madism. St #120 Tallahassee, PZ-32304	-
	Tallahassee, FZ. 32304	_
	her than the date of filing: 12.15.202 te is listed, the date must be specific and cannot	. (OPTIONAL) of be more than five days prior or 90 days after the
	nserted in this block does not meet the applicable ective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
Having been named certificate, I am fan	d as registered agent to accept service of process f niliar with and accept the appointment as register	or the above stated corporation at the place designated in thired agent and agree to act in this capacity
2		1215.2023
	Required Signature/Registered Agent	
	nent and affirm that the facts stated herein are partment of State constitutes a third degree felon	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.
2		12.15.2023
Required Signature	/Incorporator	Date

F.: 12: 4: