

P24000016394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

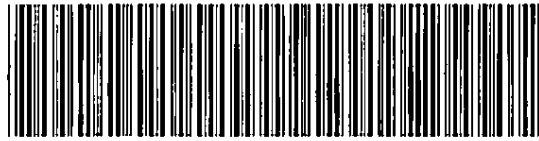
(Document Number)

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FILED

2024 MAR -5 AM 9:07

FILED

RECEIVED

2024 MAR -5 PM 3:00

FILED

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 3/5/2024

PRIORITY Regular Approval

OUR REF # (Order ID#) 1234557

ORDER ENTITY

VITAL SINES INTERNATIONAL INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

VITAL SINES INTERNATIONAL INC. (FL)

New corp filing

NOTES:

\$70.00 Authorized

Email address for annual report reminders: radiv@incserv.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "WJ" or similar, written over a horizontal line.

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TALLAHASSEE, FL

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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: VITAL SINES INTERNATIONAL INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

619 JUNGLE QUEEN WAY
LONGBOAT KEY, FL 34228

619 JUNGLE QUEEN WAY
LONGBOAT KEY, FL 34228

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LAWFUL ACT OR ACTIVITY

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JESS GOODMAN, D/P

Name and Title: SINDY ATHANASSOULIS, CFO

Address 619 JUNGLE QUEEN WAY
LONGBOAT KEY, FL 34228

Address: 7 FOGERTY ST
BRAMPTON, CANADA L6Y 5K3

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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2024 MAR -5 AM 9:07
VITAL SINES INC

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: HSIN-HUI GORDON

Address: 98 CUTTERMILL ROAD, STE 466

GREAT NECK, NY 11021

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

3/5/2024

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 §817.155, F.S.

HSIN-HUI GORDON

Required Signature/Incorporator

3/5/2024

Date