

P95000034305

VINMAR INC.
3410 Pinewalk Drive North, #825
Margate, Florida 33063
305/341-5332

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 26 PM 1:46

April 17, 1995

Secretary of State
New Filings Section
409 East Gaines Street
Tallahassee, Florida 32399

Re: VINMAR INC.

700001465707
-04/26/95--01101--012
*****70.00 *****70.00

Dear Sirs:

Enclosed please find one fully-executed and one copy of the Articles of Incorporation of Vinmar Inc. Also enclosed is a check in the amount of \$70.00 covering the filing fee, and registered agent fee.

Please return the date-stamped copy to the undersigned in the enclosed envelope. In the event you have any questions, please feel free to contact me at the number listed above.

Sincerely,


Vincent Francis Foti

SDG

ARTICLES OF INCORPORATION

OF

VINMAR INC.

The undersigned, a natural person competent to contract, does hereby make, subscribe and file these Articles of Incorporation for the purpose of organizing a corporation under the laws of the State of Florida.

ARTICLE I
CORPORATE NAME

The name of this Corporation shall be: VINMAR INC.

ARTICLE II
PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of the Corporation is 3410 Pinewalk Drive North, #825, Margate, Florida 33063.

ARTICLE III
CAPITAL STOCK

The maximum number of shares that this Corporation shall be authorized to issue and have outstanding at any one time shall be 1000 shares of common stock, 1.00 par value per share.

ARTICLE IV
REGISTERED AGENT AND
INITIAL REGISTERED OFFICE IN FLORIDA

The Registered Agent and the street address of the initial Registered Office of this Corporation in the State of Florida shall be Vincent Francis Foti, 3410 Pinewalk Drive North, #825, Margate, Florida 33063.

ARTICLE V
INCORPORATOR

The name and address of the person signing these Articles of Incorporation as the Incorporator is Vincent Francis Foti, 3410 Pinewalk Drive North, #825, Margate, Florida 33063.

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**ARTICLE VI
INDEMNIFICATION**

This Corporation shall indemnify any director, officer, employee or agent of the Corporation to the fullest extent permitted by Florida law.

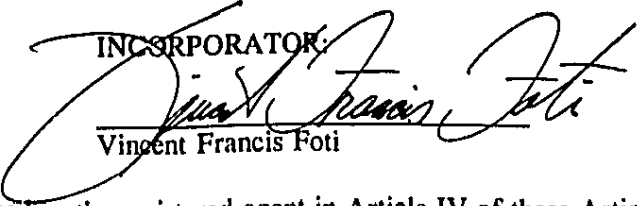
**ARTICLE VII
AFFILIATED TRANSACTIONS**

This Corporation expressly elects not to be governed by Section 607.0901 of the Florida Business Corporation Act, as amended from time to time, relating to affiliated transactions.

**ARTICLE VIII
CONTROL SHARE ACQUISITIONS**

This Corporation expressly elects not to be governed by Section 607.0902 of the Florida Business Corporation Act, as amended from time to time, relating to control share acquisitions.

INCORPORATOR:


Vincent Francis Foti

THE UNDERSIGNED, named as the registered agent in Article IV of these Articles of Incorporation, hereby accepts the appointment as such registered agent, and acknowledges that he is familiar with, and accepts the obligations imposed upon registered agents under, the Florida General Corporation Act, including specifically Section 607.0505.

REGISTERED AGENT:


Vincent Francis Foti

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VINMAR INC.

1445 NE 17 Avenue, Fort Lauderdale, Florida 33304
954/568-6632

Florida Department of State
Secretary of State
Divisions of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Change of Address – VINMAR INC.

Please be advised that the current address for the above listed corporation is as follows:

VINMAR INC.
1445 NE 17th Avenue
Fort Lauderdale, FL 33304

Please feel free to contact me, should you have any questions.

Sincerely,



Vincent Foti
President

AF
2-6-96

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000034305**

1. Corporation Name

VINMAR INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

1445 NE 17TH AVE.
FT. LAUDERDALE FL 33304

Mailing Address

1445 NE 17TH AVE.
FT. LAUDERDALE FL 33304

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

04/26/1995

Suite, Apt. #, etc

Suite, Apt. #, etc.

5. FEI Number

65-0577602

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
P/V/D	VINCENT FOTI	1445 NE 17TH AVE FT LAUDERDALE FL 33304	

000001986600--3
-10/25/96--01106--014
***375.00 ***375.00

[Signature]
10/21/96

8. Name and Address of Current Registered Agent

FOTI, VINCENT F
3410 PINEWALK DR N
#825
MARGATE FL 33063

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 10-15-96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VINCENT FOTI

9/18/96
Date

(954) 922-8900
Daytime Phone #

CR2040 (7/96)