P96000048850

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

SUBJECT:	d Assicolinites	, Ino.			
(F	Proposed corporate	name - must include su	iffix)		
			(3) *	100000118 16706796010 *****78.75 *	53863 87-004 ****78.75
Enclosed is an original	l and one (1) c	opy of the articles o	f incorporation	and a check	
for : \$70.00 Filing Fee	Filing Fee & Certificate	#122.50 Filing Fee & Certified Copy Additional Cop	#131.25 Filing Fee, Certified Copy & Certificate y Required	TAS va	
. FROM:	Victoria	M. Anzola		וויים וויים	n
	Name (printed or typed)		H-6	100 12 E 100 12 E	
	6331 S.W. 18 Terr.		SEE. OF	177	
	Address		ည်က တဲ့		
	Miami,FL	33155		35 ORID	
		ty, State & Zip -3324		Þ	
	Dayvirn	Telephone number			

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

VA and Associates, Inc.

ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:

6331 S.W. 16 Terr. Miami, FL 33155

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Jose L. Otero 6331 S.W. 18 Terr. Miami, FL 33155

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Victoria M. Anzola 6331 S.W. 18 Torr. Miami, FL 33155

	s) has(have) executed these Articles of Is	ncorporation this
04 day of June		
	added if an effective date is requested.)	
Vie	toria M. angre	
	Signature	

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	VA and Associates,	Ino.
2. The name and address of the regi	stered agent and office is:	
Jo	se L. Otero	TASE 96
633	(NAME) 1 S.W. 18 Terr.	CRETTE -6
(P.O. E	ок ог Mail Drop Box NOT ACCEPTABLE)	
	mi, FL 33155	To en D
	(CITY/STATE/ZIP)	ORIDA ORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature) 6/4/96 (DATE)