# P96000062715

Department of State Division of Corporation P.O. Box 6327 Taliahassee, FL 323 SUBJECT:		6000001691469 -07/11/9601089003 ****122.50 ****122.50
	(proposed corporate name)	
Enclosed is an originator \$122.50	al and one (1) copy of the articles of incorpora	ation and our check
-	RICHARD RIESENBERG  Name (printed or typed) 644 E HALLANDALE BEACH BLVD	-
	Address  HALLANDALE, FLORIDA 33009  City, State, & Zip  954 ) 458-5514  Telephone Number	SECULIA P
		FILENDE

Note: Please provide the original and one copy of the Articles.

12 7·11



July 12, 1996

RICHARD ALECENBERG 644 E. HALLANDALE BEACH BLVD HALLANDALE, FL 33009

SUBJECT: VIDA-NADA, CORP. Ref. Number: W96000014575

CHANGE TO: VIDA-NADA, CORP.

We have received your document for EURO-STYLE, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved entity. Names of administratively dissolved entities are not available for one year from the date of administrative dissolution unless the dissolved entity provides the Department of State with a notarized affidavit executed as required by section 607.0120, 617.01201, 608.5135 or 608.4482 Florida Statutes, permitting the immediate assumption or use of the name by another entity.

Simply adding "of Florida" or "Florida" to the end of a name does not constitute a difference.

When the document is resubmitted, please return a copy of this letter to ensure proper handling.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

if you have any questions concerning the filing of your document, please call (904) 487-6052.

Kimberly Rolfe Document Specialist

Letter Number: 696A00033908

## ARTICLES OF INCORPORATION

QΕ

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VIDA-NADA, CORP.

SECRETATIVE SECTION OF ALL VILLE SECRETARION

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

## ARTICLE I NAME

The name of the corporation shall be:

VIPA-NADA, CORP.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

650 E. HALLANDALE BEACH BLVD., HALLANDALE, FLORIDA 33009

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding

1000 SHARES COMMON

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

VIDA IMAMOVIC 2186 N.E. 56TH STREET FT.LAUDERDALE, FLORIDA 33308

### ARTICLE V INCORPORATOR(S)

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

VIDA IMAMOVIC

2186 N.E. 56th STREET #107 FT.LAUDERDALE, FLORIDA 33308

NADA IMAMOVIC

713 N.E. 8TH STREET #5. HALLANDALE, FLORIDA 33009

Articles of Incorporation Filing Fee - \$35

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501. 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:	VIDA-NADA, CORP.	. 9
			The second
2,	The name and address of the regist	tered agent and office is:	The state of the s
	VIDA IMAMOV	IC	
	(NAME	)	
	2186 N.E. 5	5th STREET #107	
	(P.O. BOX <u>NOT</u>	ACCEPTABLE)	
	FT. LAUDERDA	ALE, FLORIDA 33308	
	(CITY/STA	ATE/ZIP)	*

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 AGF TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROFER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE Vide Janovnomia

DATE 4/9/96