

# **Electronic Articles of Incorporation For**

**P24000054801  
FILED  
August 21, 2024  
Sec. Of State  
snchatham**

VIDA HEALTHCARE INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

## **Article I**

The name of the corporation is:

VIDA HEALTHCARE INC

## **Article II**

The principal place of business address:

1900 GLADES ROAD  
4TH FLOOR  
BOCA RATON, FL. 33431

The mailing address of the corporation is:

1900 GLADES ROAD  
4TH FLOOR  
BOCA RATON, . 33431

## **Article III**

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

## **Article IV**

The number of shares the corporation is authorized to issue is:

1000

## **Article V**

The name and Florida street address of the registered agent is:

VERONICA KATZ  
1900 GLADES ROAD  
4TH FLOOR  
BOCA RATON, FL. 33431

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: VERONICA KATZ

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## **Article VI**

The name and address of the incorporator is:

VERONICA KATZ  
1900 GLADES ROAD  
4TH FLOOR  
BOCA RATON, FL 33431

Electronic Signature of Incorporator: VERONICA KATZ

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
VERONICA KATZ  
1900 GLADES ROAD 4TH FLOOR  
BOCA RATON, FL. 33431 UN

## **Article VIII**

The effective date for this corporation shall be:

08/20/2024

# P24000054801

1. **Affiant:** My name is Veronica Katz. I am of legal age and competent to make this affidavit. I am the would be CEO, President, and Secretary of VIDA HEALTHCARE INC and authorized to speak on behalf of the entity.

2. **Entity Information:**

- o Document Number: W24000120213
- o Entity Name: VIDA HEALTHCARE INC
- o Tracking Number: 600434556606
- o Pin Number: 6606
- o

3. **Acknowledgment of Name Conflict:**

We acknowledge that we have received notice indicating that the name "VIDA HEALTHCARE INC" as designated in our document is unavailable because it is the same as, or not distinguishable from, the name of an existing entity. The document number of the name conflict is P15000034849.

4. **Request to Proceed:**

Despite the similarity between our proposed entity name and the name associated with document number P15000034849, we would like to proceed with the filing of our name, "VIDA HEALTHCARE INC" as we feel the name is distinguishable for several reasons than that of the name in potential conflict in name P15000034849.

5. **Understanding:**

We understand that the several reasons we have makes our name VIDA HEALTHCARE INC distinguishable from the one presently on file. We would prefer to retain the name "VIDA HEALTHCARE INC" as it is crucial to our branding and business identity.

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Veronica Katz  
VIDA HEALTHCARE INC

Sworn to and subscribed before me this 26 day of August, 2024.

