Fax, +13057143014

To: Division of Corporations

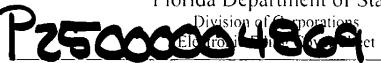
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Division of Corporations

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Florida Department of State



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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CUSI CONSULTING, INC.

Account Number : I20230000150 : (786)616-3495 Fax Number : (305)714-3014

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## FLORIDA PROFIT/NON PROFIT CORPORATION

V&D Solutions Group, Inc.

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

CLEH BRISO	DOLOCUCE		
<i>CLETT PRINCL</i> P	rincipal street address	Mailing a	ddress, if different is:
50 NW 45th Ave	e Apt 15	·	
liami, FL 33126			
CLETIT PURPOS urpose for which the	o <u>E</u> corporation is organized is:LogisI	tic	
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umber of shares of st CLE V INITIAL  Name and Title:	OFFICERS AND/OR DIRECTORS  Daniel Hernandez, President  850 NW 45th Ave Apt 15	Name and Title:	
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Name and Title: Address  Name and Title: Address	Daniel Hernandez, President  850 NW 45th Ave Apt 15  Miami, FL 33126	Name and Title: Address:  Name and Title: Address:	25 JAN 29 AM 3:
Name and Title: Address  Name and Title: Address	OFFICERS AND/OR DIRECTORS  Daniel Hernandez, President  850 NW 45th Ave Apt 15  Miami, FL 33126	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	25 JAN 29 AM 3: 55
Name and Title: Address  Name and Title: Address	Daniel Hernandez, President  850 NW 45th Ave Apt 15  Miami, FL 33126	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	25 JAN 29 AM 3:

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Name an	d Title:	Name and Title:	
Address	5	Address:	
	- <del>101-11</del>		
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptal	ole) of the registered agent is:	
Name:	Daniel Hernandez		25 %
Address:	850 NW 45th Ave Apt 15		JAN
	Miami, FL 33126	+1	FILE ARY ( 29 1
ARTICLE VII	INCORPORATOR		FILED FILED STATE S JAN 29 AM 3: 55
The <u>name and ac</u>	Idress of the Incorporator is:		25 1.04 VIE
Name:	Daniel Hernandez		<i>/</i>
Address:	850 NW 45th Ave Apt 15	<del></del>	
	Miami, FL 33126		
Effective date if	EFFECTIVE DATE: other than the date of filing: late is listed, the date must be specific and	. (OPTIONAL cannot be more than five days p	) orior or 90 days after the
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Having been nar certificate, I am	ned as registered agent to accept service of pro familiar with and accept the appointment as re	cess for the above stated corporati egistered agent and agree to act in	ion at the place designated in thi this capacity
	AM/		1-28-25
	Required Signature/Registered Ager		Date
I submit this do document to the	cument and affirm that the facts stated herei Department of State constitutes a third degree	n are true. I am aware that the j felony as provided for in s.817.15	false information submitted in 55, F.S.
	1877		1-28-25
Required Signat	ure/incorporator	1)	date