

7/5/22, 1:41 PM

P220000053771

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000228917 3)))



H220002289173ABCD

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305)599-0839
Fax Number : (305)592-9591

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

2022 JUL -5 PM 4:04

REGISTRATION SPECIAL SERVICES

**FLORIDA PROFIT/NON PROFIT CORPORATION
13 FELONYS INC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

2022 JUL -5 AM 10:46

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

ARTICLE I NAME

The name of the corporation shall be: 13 FELONYS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

18255 NW 68 AVE APT 420

18255 NW 68 AVE APT 420

HIALEAH, FL 33015

HIALEAH, FL 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LOGOS, CLOTHING DESIGNS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DYLAN A. ARABI ORENSE

Name and Title: _____

Address 1670 NE 145TH ST

Address: _____

NORTH MIAMI BEACH, FL 33181

PRESIDENT (50 SHARES)

Name and Title: AHMED AMOURI

Name and Title: _____

Address 18255 NW 68 AVE APT 420

Address: _____

HIALEAH, FL 33015

VICEPRESIDENT (50 SHARES)

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2022 JUL -5 AM 10:46

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: AHMED AMOURI

Address: 18255 NW 68 AVE APT 420
HIALEAH, FL 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DYLAN A. ARABI ORENSE

Address: 1670 NE 145TH ST
NORTH MIAMI BEACH, FL 33181

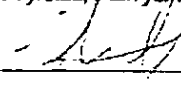
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JULY 01, 2022 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

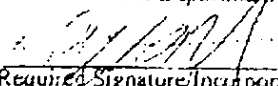


 Required Signature/Registered Agent

JULY 01, 2022

 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.



 Required Signature/Incorporator

JULY 01, 2022

 Date

2022 JUL-5 PM 10:10