

P2300001

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Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (350)617-6381

From: Account Name : FASTKIT CORP
Account Number : 120100000009
Phone : (305)599-0839
Fax Number : (305)592-9592

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
EMPIRE MEDICAL RESEARCH CORP

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

5 FEB 13 1:47

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Electronic Filing Menu

Corporate Filing Menu

Help

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: EMPIRE MEDICAL RESEARCH CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address
1235 N KROME AVE
HOMESTEAD, FL 33030

Mailing address, if different is:
1235 N KROME AVE
HOMESTEAD, FL 33030

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES AT \$1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ernesto Diaz Medina, President
Address: 1235 N KROME AVE
HOMESTEAD, FL 33030

Name and Title: Omar Sanchez Guevara, Secretary & Treasurer
Address: 1235 N KROME AVE
HOMESTEAD, FL 33030

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

23 FEB 9 11:12:35

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: Ernesto Diaz Medina
 Address: 1235 N KROME AVE
HOMESTEAD, FL 33030

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ernesto Diaz Medina
 Address: 1235 N KROME AVE
HOMESTEAD, FL 33030

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

Ernesto Diaz Medina
 Required Signature/Registered Agent

02-07-2023
 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.

Ernesto Diaz Medina
 Required Signature/Incorporator

02-07-2023
 Date

23 FEB 10 10:05 AM '23