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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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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:_____

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FLORIDA PROFIT/NON PROFIT CORPORATION
L S M LOGISTICS, INC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	$78.75

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:

L S M LOGISTICS, INC

ARTICLE II   PRINCIPAL OFFICE

The principal street address and mailing address, if different is:
13234 SW 86 TERRACE
MIAMI, FL 33183

ARTICLE III   PURPOSE

The purpose for which the corporation is organized is:
TO ENGAGE IN ANY LAWFULL BUSINESS PERMITTED

ARTICLE IV   SHARES

The number of shares of stock is:
100 SHARES OF $10.00M PAR VALUE

ARTICLE V   INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Salvador	13234 SW 86	Director &
Montaruli	Terr, Miami FL	President
	33183	

ARTICLE VI   REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Salvador Montaruli
13234 SW 86 Terr, Miami, FL 33183

ARTICLE VII   INCORPORATOR

The name and address of the Incorporator is:
Salvador Montaruli
13234 SW 86 Terr, Miami, FL 33183

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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

_____   5/1/10
Signature/Registered Agent   Date

_____   5/1/10
Signature/Incorporator   Date