

# P11000059007

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 : 120100000009  
Phone : (305) 599-0839  
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11 JUN 24 PM 2:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION  
MARIN PRODUCTIONS AND MUSIC CORP

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

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Corporate Filing Menu

Help

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

**ARTICLE I NAME** MARIN PRODUCTIONS AND MUSIC CORP  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
10425 SW 5 ST  
MIAMI FL 33174

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
MUSIC PRODUCTIONS, EVENTS AND ALL OTHERS ACTIVITIES PERMITTED BY THE LAWS  
OF THE STATE OF FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is 100 SHARES

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: MAYNOR MARIN P/D/T 100 SHARES  
Address: 10425 SW 5 ST  
MIAMI FL 33174

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: JOSE EFRAIN MARIN VP/S  
Address: 11371 NW 4 ST  
MIAMI FL 33172

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: JOSE EFRAIN MARIN  
Address: 11371 NW 4 ST  
MIAMI FL 33172

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: JOSE EFRAIN MARIN  
Address: 11371 NW 4 ST  
MIAMI FL 33172

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

08/23/2011

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

08/23/2011

Date

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