

P110000081638

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.**

(((H11000226789 3)))



H110002267893ABC3

**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: \_\_\_\_\_

SEP 15 AM 10:02  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

APPROVED  
AND  
FILED

**FLORIDA PROFIT/NON PROFIT CORPORATION  
TITLE OF THE WORLD INC.**

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

Electronic Filing Menu

Corporate Filing Menu

Help

VH

APPROVED  
AND  
FILED

11 SEP 15 AM 10:02

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME** TITLE OF THE WORLD INC.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
1680 Michigan Ave Suite # 1022  
Miami Beach, Florida 33139

Mailing address, if different is:

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
to transact any legal business

**ARTICLE IV SHARES**  
The number of shares of stock is: 100 of \$1 par value each

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

Name and Title: Lorenzo Padon P/T/S	Name and Title: _____
Address: 1680 Michigan Ave Suite #1022	Address: _____
Miami Beach Florida 33139	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
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: Ugo V Chiarato  
Address: 1680 Michigan Ave Suite # 1022  
Miami Beach, Florida 33139

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Lorenzo Padon  
Address: 1680 Michigan Ave Suite # 1022  
Miami Beach, Florida 33139

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

*Ugo V Chiarato*

Required Signature/Registered Agent

September 13, 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.817.153, F.S.

*Lorenzo Padon*  
Required Signature/Incorporator

September 13, 2011

Date