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Florida Department of State
Division of Corporations
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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
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: _____

FLORIDA PROFIT/NON PROFIT CORPORATION FAST HOUSING SOLUTIONS INC

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

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

12 MAY -3 PM 12:49

ARTICLE I NAME FAST HOUSING SOLUTIONS INC
The name of the corporation shall be:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE
Principal ~~street~~ address
7661 NW 88 ST #108
MIAMI FL 33166

Mailing address, if different is:
SAME

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
SHIPPING AND FREIGHT

ARTICLE IV SHARES
The number of shares of stock is: 10 SHARES OF \$10.00 EACH

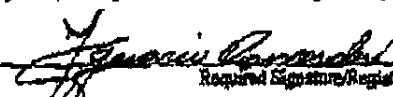
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HUGO M. LUCIANI SR	Name and Title: PRESIDENT
Address: 10317 NW 9 ST CIR A-206	Address:
MIAMI, FLORIDA 33172	
<hr/>	
Name and Title: HUGO M. LUCIANI JR	Name and Title: VICE PRESIDENT
Address: 10317 NW 9 ST CIR A-206	Address:
MIAMI, FLORIDA 33172	
<hr/>	
Name and Title: IGNACIO CERRADA	Name and Title: SECRETARY-TREASURER
Address: 10317 NW 9 ST CIR A-206	Address:
MIAMI, FLORIDA 33172	
<hr/>	

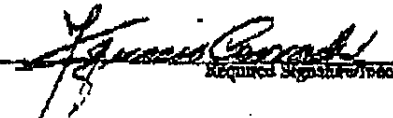
ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: IGNACIO CERRADA
Address: 10317 NW 9 ST A-206
MIAMI, FLORIDA 33172

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: IGNACIO CERRADA
Address: 10317 NW 9 ST A-206
MIAMI, FLORIDA 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
4-21-12 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
4-21-12 Date