

**P13000006231**

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: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**A.C.D Minerals Inc**

Certificate of Status	0
Certified Copy	1
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JB

**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: A.C.D Minerals Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

407 Lincoln Rd Ste 9a

Miami Beach, Fl 33139

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: All & Any lawful business in the State of Florida.

**ARTICLE IV SHARES** 100

The number of shares of stock is:

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

Name and Title: Angel C Del Guercio - President

Address: 407 Lincoln Rd Ste 9a  
Miami Beach, Fl 33139

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_

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(cont.)

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: Brito & Brito Accounting Inc.  
Address: 407 Lincoln Rd Ste 9A  
Miami Beach, FL 33139

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Angel C Del Guercio  
Address: 407 Lincoln Rd Ste 9a  
Miami Beach, FL 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*

\_\_\_\_\_  
Required Signature/Registered Agent

1/17/2013

\_\_\_\_\_  
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

1/17/2013

\_\_\_\_\_  
Date

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