

P130001765562

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.

((H130001766553)))



H130001766553ABC1

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: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 AUG -8 AM 9:39

**FLORIDA PROFIT/NON PROFIT CORPORATION
SURICH 1 CORPORATION**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

13 AUG -8 PM 4:19
RECEIVED

Electronic Filing Menu

Corporate Filing Menu

Help

PS 8/8/13

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (PROVISION OF CORPORATIONS)

FILED

SECRETARY OF STATE
VISION OF CORPORATIONS**ARTICLE I NAME**

The name of the corporation shall be:

SURICH 1 CORPORATION

13 AUG - 8 AM 9:39

ARTICLE II PRINCIPAL OFFICE

Principal street address

1190 W. 68TH STREET

Mailing address, if different is:

HIALEAH; FL 33014**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: **ALL LEGAL AND LAWFULL BUSINESS ALLOWED
IN THE STATE OF FLORIDA****ARTICLE IV SHARES**The number of shares of stock is: **1,000****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **LIVAN CHIRINO PRESIDENT**

Name and Title:

Address: **1190 W. 68TH STREET**

Address:

HIALEAH, FL. 33014Name and Title: **JUAN CHIRINO VICE PRESIDENT**

Name and Title:

Address: **1190 W. 68TH STREET**

Address:

HIALEAH, FL. 33014

Name and Title:

Name and Title:

Address:

Address:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

(cont.)

Name and Title: _____ Name and Title: 13 AUG -8 AM 9:39Address: _____ Address: _____

_____**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: LIVAN CHIRINO
Address: 1190 W. 68TH STREET
HIALEAH, FL. 33014**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: LIVAN CHIRINO
Address: 1190 W. 68TH STREET
HIALEAH, FL. 33014*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*Livan Chirino

Required Signature/Registered Agent

8/8/13

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.*Livan Chirino

Required Signature/Incorporator

8/8/13

Date