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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 annual report mailings. Enter only one email address please.**

Email Address: _____

14 JAN 29 AM 7:56
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

FLORIDA PROFIT/NON PROFIT CORPORATION
REELESTATES.COM, Inc.

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

RECEIVED

14 JAN 29 PM 4:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
REELESTATES.COM, Inc.

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

ARTICLE I NAME

REELESTATES.COM, Inc.

ARTICLE II PRINCIPAL OFFICE

1430 S. Dixie Hwy. Suite 308, Coral Gables, FL 33146

ARTICLE III PURPOSE

To conduct marketing services for the real estate business. In addition, this corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Carlos Prio (President) 1430 S. Dixie Hwy. Suite 308, Coral Gables, FL 33146

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

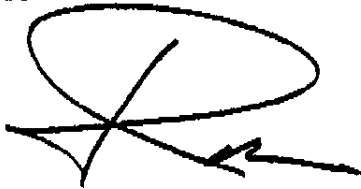
Mailing Address:

Carlos Prio PO BOX 145280 Coral Gables, FL 33114

Street Address:

Carlos Prio 1430 S. Dixie Hwy. Suite 308, Coral Gables, FL 33146

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



1/29/14

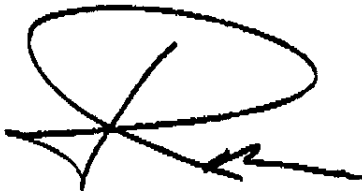
Required Signature/Registered Agent Date

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TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

Carlos Prio 1430 S. Dixie Hwy. Suite 308, Coral Gables, FL 33146

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.



01/29/14

Required Signature/Registered Agent Date