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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 : 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: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY -8 PM 1:28

APPROVED
AND
FILED

FLORIDA PROFIT/NON PROFIT CORPORATION
KIFA INTERNATIONAL CORP.

Certificate of Status	0
Certified Copy	1
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15 MAY -8 PM 4:12

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HALIALVAREZ & FERNANDEZ

APPROVED
AND
FILED
002/003

15 MAY -8 PM 1:21

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME
The name of the corporation shall be: KIFA INTERNATIONAL CORP.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
650 NW 43RD AVENUE
MIAMI, FL. 33126-5406

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CATERING AND BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 500 AT \$1.00 EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>MARGARETH PORPIGLIA DIRECTOR</u>	Name and Title:	_____
Address	<u>155 OCEAN LANE DRIVE APT. 312</u>	Address:	_____
	<u>KEY BISCAYNE, FL. 33149</u>		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

APPROVED
AND
FILED

15 MAY -8 PM 1:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: EMILIO B. ALVAREZ
Address: 650 N.W. 43RD AVENUE
MIAMI, FL. 33126-5406

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: EMILIO B. ALVAREZ
Address: 650 N.W. 43RD AVENUE
MIAMI, FL. 33126-5406

ARTICLE VIII EFFECTIVE DATE

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

MAY 8TH, 2015

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 § 817.195, F.S.



Required Signature/Incorporator

MAY 8TH, 2015

Date