

# P15000049121

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: \_\_\_\_\_

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15 JUN -4 PM 3:55

SUNBIZ  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Benell, Inc**

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

T. Burch JUN 5 2015

**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: Benelli, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

401 69th Street Apt 807

Miami Beach, FL 33141

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Investing

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Matia E. Iglesias, President

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

Address: 401 69th Street Apt 807

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

Miami Beach, FL 33141

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

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

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

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

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

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

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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: Maria E. Iglesias  
 Address: 401 69th Street Apt 807  
Miami Beach, FL 33141

FILED  
 15 JUN -4 PM 4:58  
 DEPARTMENT OF STATE  
 TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Maria E. Iglesias  
 Address: 401 69th Street Apt 807  
Miami Beach, FL 33141

**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.)

**Notes:** 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

X Maria E. Iglesias  
 Required Signature/Registered Agent

06-03-2015  
 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 s. 817.155, F.S.

Maria E. Iglesias  
 Required Signature/Incorporator

06-03-2015  
 Date