

H1500024088574

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: _____

15 OCT 2015 08:00 AM
 15 OCT 2015 08:00 AM

FLORIDA PROFIT/NON PROFIT CORPORATION
REY OSCAR INC

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

15 OCT - 7 PM 8:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED
 15 OCT 2015 08:00 AM

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

ARTICLE I NAME REY OSCAR INC
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address _____ Mailing address, if different is: _____
16450 MIAMI DRIVE STE 501 _____
NORTH MIAMI BEACH _____
FL, 33162 _____

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: TRAILERS MAINTENANCE & REPAIR

ARTICLE IV SHARES 100 PER VALUE \$ 1.00
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: OSCAR RIVERON Name and Title: _____
Address: 16450 MIAMI DRIVE STE 501 Address: _____
NORTH MIAMI BEACH, FL, 33162 _____

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

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

15 OCT 17 P 18 04
SECY. OF STATE
TALLAHASSEE, FLORIDA
1992

FILED

Name and Title:	OSCAR RIVERON PRES	Name and Title:
Address:	16450 MIAMI DRIVE STE 501	Address:
	NORTH MIAMI BEACH, FL, 33162	

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:	OSCAR RIVERON
Address:	16450 MIAMI DRIVE STE 501
	NORTH MIAMI BEACH, FL, 33162

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:	OSCAR RIVERON
Address:	16450 MIAMI DRIVE STE 501
	NORTH MIAMI BEACH, FL, 33162

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 named 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.

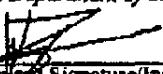


Required Signature/Registered Agent

10-7-15

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. 877.155, F.S.



Required Signature/Incorporator

10-7-15

Date