

# P16000051078

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.**

((H16000145489 3)))



H160001454893ABC5

**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: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
HAVANA PALLETS USA, INC**

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

RECEIVED

16 JUN 14 PM 4:41

STATE  
TALLAHASSEE, FLORIDA

FILED  
16 JUN 14 PM 4:15  
TALLAHASSEE, FLORIDA

06-15-16

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

**ARTICLE I NAME** HAVANA PALLETS USA, INC  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address \_\_\_\_\_

YOEL RODRIGUEZ  
500 ORANGE AVE CIRCLE BUILDING 560741200  
BELLE GLADE, FL, 33430

Mailing address, if different is: \_\_\_\_\_

**ARTICLE III PURPOSE** MANUFACTURE AND REPAIR OF PALLETS  
The purpose for which the corporation is organized is: \_\_\_\_\_

**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:	<u>YOEL RODRIGUEZ</u>	Name and Title:	_____
Address	<u>500 ORANGE AVE CIRCLE</u>	Address:	_____
	<u>BLDG 560741200</u>		_____
	<u>BELLE GLADE, FL, 33430</u>		_____

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

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

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

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

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

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

FILED  
16 JUN 14 PM 1:15  
CLERK OF COURT  
FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

Name: YOEL RODRIGUEZ  
Address: 500 ORANGE AVE CIRCLE BLDG 56074120  
BELLE GLADE, FL, 33430

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: YOEL RODRIGUEZ  
Address: 500 ORANGE AVE CIRCLE BLDG 56074120  
BELLE GLADE, FL, 33430.

**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

6/09/2016

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.*

  
Required Signature/Incorporator

6/09/2016

Date