

P160000051086

**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
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16 JUN 14 PM 8:28
TALLAHASSEE, FLORIDA
272
Request

****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

Elite Nutrition Official Inc.

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

RECEIVED
16 JUN 14 PM 4:55
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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16 JUN 14 AM 8:28

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME
The name of the corporation shall be: Elite Nutrition Official Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

827-15 street, Apt 16A

Miami Beach, FL 33139

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Sales

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Juan Camilo Medina Florez

Name and Title: President

Address 827-15 street, Apt 16A

Address: _____

Miami Beach, FL 33139

Name and Title: Juan Camilo Rodriguez Rodriguez

Name and Title: Vice President

Address 827-15 street, Apt 16A

Address: _____

Miami Beach, FL 33139

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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16 JUN 14 AM 8:29

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: Juan Camilo Medina Florez
Address: 827-15 street, Apt 16A
Miami Beach, FL 33139

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Juan Camilo Medina Florez
Address: 827-15 street, Apt 16A
Miami Beach, FL 33139

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
06/10/2016
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
06/10/2016
Date