

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

RECEIVED  
JUN 30 9 35 AM  
TALLAHASSEE, FLORIDA

**\*\*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  
LE SYBARITE CORP.**

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

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JUN 30 4 08 PM  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

7-1-2016

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

FILED  
JUN 30 AM 9:35  
STATE OF FLORIDA

ARTICLE I NAME LE SYBARITE CORP.  
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE  
Principal street address

Mailing address, if different is:

650 N.W. 43RD AVENUE

MIAMI, FL. 33126

ARTICLE III PURPOSE  
The purpose for which the corporation is organized is: RETAIL AND WHOLESALERS OF DOMESTIC EUROPEAN  
CANNED PRODUCTS AS WELL AS CATERING SERVICES.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FRANCISCO BORJA DELCLAUX, DIR. Name and Title:

Address 650 N.W. 43RD AVENUE Address:

MIAMI, FL. 33126

Name and Title: YULIANA ANDREA CORTES, DIR. Name and Title:

Address 650 N.W. 43RD AVENUE Address:

MIAMI, FL. 33126

Name and Title: Name and Title:

Address Address:

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: FRANCISCO BORJA DELCLAUX  
Address: 650 N.W. 43RD AVENUE  
MIAMI, FL. 33126

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

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

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 7/1/2016 (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  
June 30th, 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  
June 30th, 2016  
Date