Florida Department of State

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(((H17000011785 3)))



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FLORIDA PROFIT/NON PROFIT CORPORATION

Milaplease, Inc.

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JAN 17 2017



January 13, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FASTKIT CORP

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

9817 IAN 13 PM 12: 56

RTICLE I NAME	Milapleasc. Inc.	2011 JAN 13 11112 30
e name of the curpora	tion shall be:	SOURCE LANGE OF STATE
RTICLE II PRINC		SECULIARY OF STATE TAIL ARASSEE. FLORIDA Mailing address, if different is:
5 NE 76St	Principal street address	Mailing address, if different is:
lami, FL 33138		Quant dis
ייי איני אוייי איני אינייייני	207	:
ne purpose for which t	Consultant the corporation is organized is:	
		
RTICLE V _INTIA	L OFFICERS AND/OR DIRECTORS	
Name and Title	Milagros Gonzalez Kastari, President	Name and Title:
	ADS NE 76+	
Address.		Address:
	Mismi, FL 33138	
		-
Name and Title		Name and Title:
Address		Address:
	•	
Name and Title		Name and Title:
Address		Address:
Voole93		Address:
		•

FILED

Name an	d Title:	Name and Tillet JAN 13 PM 12: 50
Address		Address:
		Address:
		39
ARTICLE YI	REGISTERED AGENT	ALV Seller on the ord name by
The name and F	lorida street address (P.O. Box NOT accept	able) of the registered again is:
Name:	Milagros Gonzalez Kastari	·
Address:	495 NE.76st	
	Miami, FL 33138	
		
ARTICLE VII	<u>INCORPORATOR</u>	
The name and a	ddress of the Incorporator is:	
	Milagros Gonzalez Kastari	
Name:	495 NE 76st	
Address:		
	Miami, FL 33138	
	EFFECTIVE DATE:	(OPTIONAL)
(If an effective	f other than the date of filing: date is listed, the date must be specific and	d cannot be more than five days prior or 90 days after the
filing.)		
		olicable stamtory filing requirements, this date will not be listed as
the document's	effective date on the Department of State's r	200103.
Having been na	med 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 appointme	nt as registered agent and agree to act in this capacity
	Men	1/12/17
	Required Signature/Registered Ag	ent Date
	cturent and affirm that the facts stated her Department of State constitutes a third degi	ein are true. I am aware that the fulsa information submitted in a ee felony as provided for in s.817.155, F.S.
	1175	1/10/12
- B	uired Signature/Incorporator	