

**P17000028397**

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (950) 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  
TIGRE INVESTMENTS, INC.**

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

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
ELECTRONIC FILING SERVICES

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17 MAR 29 AM 10:39  
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TALLAHASSEE, FLORIDA

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K. Brumbley

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

**ARTICLE I NAME**

The name of the corporation shall be: TIGRE INVESTMENTS, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

739 Washington Avenue, Suite 900097

Homestead, Florida 33090

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation:

**ARTICLE IV SHARES**

The number of shares of stock is: 100 Shares \$1.00 Par Value

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Luis Mejias / President / Director

Address: 739 Washington Avenue

Suite 900097

Homestead, Florida 33090

Name and Title: Carlos Morales / Vice Pres / Secretary

Address: 739 Washington Avenue

Suite 900097

Homestead, Florida 33090

Name and Title: Jason Sheehan / Director

Address: 739 Washington Avenue

Suite 900097

Homestead, Florida 33090

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

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

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

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

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

**ARTICLE VI REGISTERED AGENT**

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

Name: Carlos Armando Morales  
Address: 14201 Cyber Place  
Tampa, Florida 33613

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Carlos Armando Morales  
Address: 739 Washington Avenue, Suite 900097  
Homestead, Florida 33090

**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 days prior or 90 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*

Carlos Morales 03/29/17  
Required Signature/Registered Agent 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.*

Carlos Morales 03/29/17  
Required Signature/Incorporator Date