

P17000078417

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.

((H17000255908 3)))



H170002559083ABC4

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 : (950) 617-6381

From: Account Name : FASTKIT CORP
Account Number : 120100000009
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 PLATELI CORP

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

N. SAMS

SEP 29 2017

RECEIVED

17 SEP 28 PM 4:08

FLORIDA DEPARTMENT OF STATE
BUREAU OF COMMERCIAL
INFORMATION SERVICES

Electronic Filing Menu

Corporate Filing Menu

Help

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: PLATELI CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8441 SW 124 AVENUE STE 106

8441 SW 124 AVENUE STE 106

MIAMI, FL 33183

MIAMI, FL 33183

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SALES AND DISTRIBUTIONS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CRISTINA SAYMAN

Name and Title: _____

Address 8441 SW 124 AVENUE STE 106

Address: _____

MIAMI, FL 33183

PRESIDENT

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

17 SEP 28 AM 11:01
CLERK OF DISTRICT COURT
CLERK OF DISTRICT COURT

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: CRISTINA SAYMAN
Address: 8441 SW 124 AVENUE STE 106
MIAMI, FL 33183

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Name: CRISTINA SAYMAN
Address: 8441 SW 124 AVENUE STE 106
MIAMI, FL 33183

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: SEPTEMBER 26, 2017 (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


Required Signature/Registered Agent

09/26/2017
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

09/26/2017
Date

SEP 28 AM 11:01
STATE OF FLORIDA