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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
Account Number : I29100000009
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
GAS STATIONS SERVICES CORP

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

RECEIVED
17 OCT 10 PM 4:18
BUREAU OF COMMERCIAL INFORMATION SERVICES

17 OCT 10 AM 9:16
STATE OF FLORIDA

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OCT 11 2017
T. SCOTT

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: GAS STATIONS SERVICES CORP

ARTICLE II PRINCIPAL OFFICE

Principal ~~office~~ address

Mailing address, if different is:

2125 BISCAYNE BOULEVARD 580A
MIAMI FLORIDA 33137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO TRANSACT ANY LEGAL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 OF \$1.- PAR VALUE EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SIMONE MARSIGLIA Name and Title: PRESIDENT

Address: 2125 BISCAYNE BLVD 580A Address: _____
MIAMI FLORIDA 33137

Name and Title: VGO V. CHIARATO Name and Title: TA/SECDIR

Address: 2125 BISCAYNE BLVD 580A Address: _____
MIAMI FLORIDA 33137

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

17 OCT 19 AM 9:16
STATE OF FLORIDA
COUNTY OF MIAMI

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: UGO V. CHIARATO
 Address: 2125 BISCAYNE BLVD 580A
MIAMI FL 33137

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: SIMONE MARSIGLIA
 Address: 2125 BISCAYNE BLVD 580A
MIAMI FL 33137

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

Ugo V. Chiarato

Required Signature/Registered Agent

OCT 10, 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.

Simone Marsiglia
 Required Signature Incorporator

OCT 10, 2017

Date