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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 : I20100000009  
Phone : (305) 599-0839  
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DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION  
M & A FAMILY ENTERPRISES CORP

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

**ARTICLE I NAME**                      M & A FAMILY ENTERPRISES CORP

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

\_\_\_\_\_  
570 E 58TH ST

\_\_\_\_\_  
570 E 58TH ST

\_\_\_\_\_  
HIALEAH, FL 33013

\_\_\_\_\_  
HIALEAH, FL 33013

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: SERVICES

**ARTICLE IV SHARES**                      100 SHARES

The number of shares of stock is: \_\_\_\_\_

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

Name and Title: MARIA M. NINO

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

Address                      570 EAST 58TH ST

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

\_\_\_\_\_  
HIALEAH, FL 33013

\_\_\_\_\_  
PRESIDENT

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

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

Address \_\_\_\_\_

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

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: MARIA M. NINO  
Address: 570 EAST 58TH ST  
HIALEAH, FL 33013

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MARIA M. NINO  
Address: 570 EAST 58TH ST  
HIALEAH, FL 33013

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: MARCH 16, 2018 (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

MARCH 16, 2018

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

MARCH 16, 2018

Date