

# P18000068656

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
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## FLORIDA PROFIT/NON PROFIT CORPORATION

Eduardo Bocanegra P.A.

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

2018 AUG -9 PM 2:56

TECHNICAL  
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: Eduardo Bocanegra P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

Eduardo Jose Bocanegra

18651 SW 104th Street

Miami, FL 33196

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Real Estate

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: Eduardo Jose Bocanegra, President

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

Address 18651 SW 104th Street

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

Miami, FL 33196

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: Eduardo Jose Bocanegra  
Address: 18651 SW 104th Street  
Miami, FL 33196

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Eduardo Jose Bocanegra  
Address: 18651 SW 104th Street  
Miami, FL 33196

**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*

\_\_\_\_\_  
Required Signature/Registered Agent  
8/8/18  
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  
8/8/18  
Date