

P18000081520

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6391

From: Account Name : FASTKIT CORP
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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
MELCON LAW FIRM, PA

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

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September 27, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FASTKIT

SUBJECT: MELCON LAW FIRM, PA
REF: W18000086409

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please list the title for the office/director.,

If you have any further questions concerning your document, please call (850) 245-6052.

KYLE D BRUMBLEY
Regulatory Specialist II
New Filing Section

FAX Aud. #: H18000281000
Letter Number: 918A00020157

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: MELCON LAW FIRM, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address
5430 WEST 14 LANE

Mailing address, if different is:

HAIALEAH, FL, 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LAW FIRM, PA

ARTICLE IV SHARES

The number of shares of stock is: 100 PER VALUE \$ 1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DARIO JESUS MELCON

Name and Title:

Address: 5430 WEST 14 LANE

Address:

HAIALEAH, FL, 33012

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: DARIO JESUS MELCON

Address: 5430 WEST 14 LANE

HIACLEAH, FL, 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DARIO JESUS MELCON

Address: 5430 WEST 14 LANE

HIACLEAH, FL, 33012

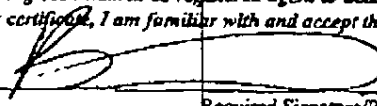
ARTICLE VIII EFFECTIVE DATE:

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

09/24/2018

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

09/24/2018

Date