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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
Fax Number : (305) 592-9551

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
OCEAN TILE KITCHEN & BATH, CORP.**

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

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Corporate Filing Menu

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10/22/18

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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: OCEAN TILE KITCHEN & BATH, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

12938 SW 120th ST.

12938 SW 120TH ST.

MIAMI, FL. 33186

MIAMI, FL. 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: KITCHEN AND BATH REMODELING AS WELL AS
RETAIL/WHOLESALE OF TILE FLOORING

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ARTICLE IV SHARES

The number of shares of stock is: 1,000 SHARES AT \$1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIULINA MISTRETTA SOLLA, PR.

Name and Title: CONSTRUCTORA PLIJ C.A., DIR.

Address: 12938 SW 120TH STREET

Address: 12938 SW 120TH ST.

MIAMI, FL. 33186

MIAMI, FL. 33186

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: CABANAS & ASSOCIATES, P.A.
Address: 8350 NW 52ND TERRACE - SUITE # 208
DORAL, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOSEPH F. CABANAS
Address: 8350 NW 52ND TERRACE - SUITE #. 208
DORAL, FL 33166

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

OCTOBER 19, 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

OCTOBER 19, 2018

Date

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