5/29/2019 Division of Corporations

P19000043922

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)592-9591

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
SWEET BRAZIL PARTY CRAFTS INC

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

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MAY 30 2019

SWEET BRAZIL PARTY CRAFTS INC

ATX1

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: SWEET BRAZIL PARTY CRAFTS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

15472 SW 48 STREET

MIAMI, FL 33185

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to transact any and all lawful business permitted under the laws of the United States of America and the laws of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is: 500 shares at $1 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PATRICIA S MAGNAVITA PRESIDENT

Address: 15472 SW 48 STREET

MIAMI, FLORIDA 33185

Name and Title:

Address:

Name and Title

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

SWEET BRAZIL PARTY CRAFTS INC

ATX1

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: PATRICIA S. MAGNAVITA

Address: 15472 SW 48 STREET

MIAMI, FLORIDA 33185

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: PATRICIA S. MAGNAVITA

Address: 15472 SW 48 STREET

MIAMI, FLORIDA 33185

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

Patricia Magnavita

Required Signature/Registered Agent

5/27/2019

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.

Patricia Magnavita

Required Signature/Incorporator

5/27/2019

Date