

1/9/2020

Division of Corporations

P20 0000001845
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000009984 3)))



H200000099843A3C%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
 Doing so will generate another cover sheet.

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

RECEIVED

2020 JAN -9 PM 4:58

FLORIDA DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 COMMERCIAL SERVICES

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

2020 JAN -9 AM 11:43
 SECRETARY OF STATE
 TALLAHASSEE, FL

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION
127 ENTERPRISES, INC.

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

Electronic Filing Menu

Corporate Filing Menu

Help

1/20/20

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: 127 ENTERPRISES, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address2600 DOUGLAS ROAD, SUITE 800
DORAL, FL 33134

Mailing address, if different is:

2600 DOUGLAS ROAD, SUITE 800
DORAL, FL 33134**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS IN THE STATE OF
FLORIDA.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JOSE PALACIOS, PRES/SEC

Name and Title: _____

Address 2600 DOUGLAS ROAD, SUITE 800

Address: _____

DORAL, FL 33134

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2020 JAN -9 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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: MARIANO J. RODRIGUEZ
 Address: 2600 DOUGLAS ROAD, SUITE 800
DORAL, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOSE PALACIOS
 Address: 2600 DOUGLAS ROAD, SUITE 800
DORAL, FL 33134

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

[Signature]
 Required Signature/Registered Agent

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.

[Signature]
 Required Signature/Incorporator

Date 1/2/20

2020 JAN -9 AM 11:43
 SECRETARY OF STATE
 TALLAHASSEE, FL
 1/1/20

FILED