

2/7/2020

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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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
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****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
KSD LOGISTICS INC.**

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

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL

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:

KSD LOGISTICS INC.**ARTICLE II PRINCIPAL OFFICE**

Principal street address

78 05 SW 102nd Pl
Miami FL 33173

Mailing address, if different is:

78 05 SW 102nd Pl
Miami FL 33173**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

P Karen Candebart

Address

78 05 SW 102nd Pl
Miami FL 33173

Name and Title:

VP Efrén J Margolles

Address:

78 05 SW 102nd Pl
Miami FL 33173

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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FL

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: West Kendall registered agents inc
 Address: 5600 sw 135 av. suite 106E.
Miami fl 33183.

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Karen Candebat
 Address: 7805 sw 102nd pl
Miami fl 33173.

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

02-05-2020
 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.

[Signature] - President
 Required Signature/Incorporator

02-05-2020
 Date