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AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared ANA GRACIA **DE REYES**, who after being firstly duly sworn, under oath, deposes and says:

- 1. The undersigned is also the sole Director and the President of **REYCAST INVESTMENTS INC.** a Florida corporation to be filed with the Florida Department of State on or about January 13, 2020.
- 2. The undersigned hereby consents to and authorizes the use by REYCAST INVESTMENTS INC, of the name REYCAST INVESTMENTS INC.
- 3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

STATE OF FLORIDA) SS: **COUNTY OF MIAMI-DADE)**

PERSONALLY appeared before me, Ana Gracia de Reyes, who is personally known to me. who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 13th day of January 2020.

STEPHANIE MARTINEZ Notary Public - State of Fiorica Commission # GG 276107 My Comm. Expires Nov 13, 2022 Bonded through National Notary Assn

Notary Public Signature

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: LONCOST TOUST TOUS SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

| \$\forall \text{\$\forall \$70.00} \quad \text{\$\sigma \$78.75} \quad \text{\$\sigma \$87.50} \quad \text{Filing Fee} \quad \text{\$\forall \$fling Fee} \quad \text{\$\forall \$Certified Copy} \quad \text{\$\forall \$Certified Copy} \quad \text{\$\forall \$Certificate of Status} \quad \text{\$\forall \$DDITIONAL COPY REQUIRED}

FROM: Stephanie Martine?
Name (Printed or typed)

8180 NW 36 St. Ht 406

Address

Doral FL 33166

City. State & Zip

305 - 406 - 3800

Daytime Telephone number

ATPLUS Q L'UE. CM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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

ARTICLE I NAM The name of the corpor	$rac{E}{c}$ ration shall be: $rac{2}{2}$	st Inve	stments	Inc	
	CCIPAL OFFICE Principal street address			ss, if different is:	
8180 NM 3	16 St, # 400		3180 NW 3	365+,#406	_
Doral FL =	·	[exal FL	_	
ARTICLE III PURI The purpose for which	POSE at the corporation is organized is:	any and	all Lawte	u business	ı·
					_
					_
					_
ARTICLE IV SHA. The number of shares of	of stock is: 1. UU				
	101 Ang Gracia de 1 5243 SW 77 th (Dayo Fl 33°	20401 (P) Name a	s: <u>5243</u>	n L Reyes 1 SW 77th U .FL 33328	Dal
Name and Tit	Sa 43 SW 7 Dave FL 333	7th WCY Address			- - -
Name and Tit. Address	5243 SW 77 Dail FL 333	Thung Addres		20 FEB -3 PH	
				1	

Name	and Title:	Name and Title:_	
Addro	ess	Address:	
	REGISTERED AGENT Florida street address (P.O. Box NOT ac	ceptable) of the registered agen	t is:
Name:	AnaGracia de Re	yes	20
Address:	5243 SW 77th W	<u> Pac</u>	
	Davie FL 3332	.8	نے کے بھارت کے اور
<u>ARTICLE VII</u>	INCORPORATOR		
The name and	address of the Incorporator is:	20.00	<u> </u>
Name:	Ana Gracia d	e legels	
Address:	5243 SW 77th) Way	
	LUNC +L 33	020	
ARTICLE VII	I EFFECTIVE DATE:	(O))	rion (1)
Effective date, (If an effective filing.)	if other than the date of filing: e date is listed, the date must be specific	and cannot be more than fiv	re days prior or 90 days after the
	ate inserted in this block does not meet the	applicable statutory filing req	uirements, this date will not be listed
the document	s effective date on the Department of State	e's records.	
	amed as registered agent to accept service on familiar with and accept the appointmen		
Vn(racie (1)		0/13/20
	·		Date
I submit this document to the	locument and affirm that the facts stated se Department of State constitutes a third a	herein are true. I am aware i legree felony as provided for in	hat the false information submitted s.817.155, F.S.
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