

3/3/2020

Division of Corporations

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet**P20000019442**

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## To:

Division of Corporations  
Fax Number : (850)617-6381

## From:

Account Name : FASTKIT CORP  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
INVERSIONES PCC, CORP.**

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

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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: INVERSIONES PCC, CORP.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

480 NE 31ST ST. - APT. # 3802480 NE 31ST ST. - APT. # 3802MIAMI, FL. 33137MIAMI, FL. 33137**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ARCHITECTURE AND ENGINEERING DESIGN**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: CONTECHA CARRILLO, PEDRO, PR

Name and Title: \_\_\_\_\_

Address 480 NE 31ST ST. - APT. #3802

Address: \_\_\_\_\_

MIAMI, FL. 33137Name and Title: CONTECHA, ZORAYA, TR

Name and Title: \_\_\_\_\_

Address 480 NE 31ST ST. - APT. #3802

Address: \_\_\_\_\_

MIAMI, FL. 33137

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 - STE. #208  
 DORAL, FL. 33166

FILED  
 2020 MAR -3 PM 12:08  
 DEPARTMENT OF  
 TREASURY  
 TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

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

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: N/A (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 fully qualified and accept the appointment as registered agent and agree to act in this capacity.

[Signature]  
 Required Signature/Registered Agent

MARCH 2, 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]  
 Required Signature/Incorporator

MARCH 2, 2020

Date