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

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(((H21000008502 3)))



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To: Division of Corporations Fax Number : (850)617-6381 Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591 2021.177.-8 \*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 Exclusive Floors, Inc.

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

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Division of Corporations

January 8, 2021

FASTKIT

SUBJECT: EXCLUSIVE FLOORS, INC.

REF: W21000001688

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Tyrone Scott Regulatory Specialist II New Filings Section

FAX Aud. #: H21000008502 Letter Number: 321A00000398

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

ARTICIE I NAME	Exclusive Floors, In-	<b>c</b> .	
The name of the corpora	Exclusive Floors, In		
ARTICLE II PRINC			ddress, if different is:
<del></del>	13/1 / 100000 12-		
	6311 Lagorce Dr	<del></del>	•
Mamil	Beach FL 33141		<del></del>
ARTICLE III PURPA	OSE the corporation is organized is: to eng	age in any activity or busin	ess permitted under the
t .	States and the State of Florida.		
	· · · · · · · · · · · · · · · · · · ·		
			2021 JAN
ARTICLE IN SHAR	Fe		
The number of shares of	stock is: 1,000		
		<del></del>	
ARTICLE V INITIA	IL OFFICERS AND/OR DIRECTORS		—
Name and Title	Juan Fernandez (President)	Name and Title:	်းမြို့ မော
	6311 Lagorce Dr		<del></del>
Address		Address:	<del>.</del>
	Miami Beach, FL 33141		
	` <del></del>		
Name and Title	· ·	Name and Title:	
Address		Address:	
`			
		<del></del>	<del></del>
Name and Title		Name and Title:	
Address			
Mudicis		Address:	
		<del></del>	<u> </u>

Name	and Title:	Name and Title:
Add	ess	Address:
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	र्थ फेंक registered agent is:
Name:	Juan Fernandez	<u>.</u>
Address:	6311 Lagarce Pr	202
	Miami Beach, FL 33141	2021 JAN : ·
APTICI E VII	I_INCORPORATOR	
	address of the Incorporator is:	<u> </u>
Name:	Juan Femandez	in a second and the s
Address:	6311 Lagorce Dr	- မျိုးသ
	Miami Beach, FL 33141	_
	I EFFECTIVE DATE:	
Effective date. (If an effective filing.)	if other than the date of filing: e date is listed, the date must be specific and cannot	ot be more than five days prior or 90 days after the
	ate inserted in this block does not nicet the applicable seffective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as
Having boom a	amed as registered agent to accept service of process; is familiar with and accept the appointment as registed	for the above stated corporation at the place designated in this red agent and agree to act in this capacity
	At .	1/6/2021
	Required Signature/Registered Agent	Date
	locument and affirm that the facts stated herein are in Department of Shate constitutes a third degree felor	e true. I am aware that the false information submitted in a ny as provided for in x 817.155, F.S.
	H	1/6/2021
Required Sign	ature/fucurporator	Date