

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : FANJUL ENTERPRISES LLC
Account Number : I20190000080
Phone : (305)603-8791
Fax Number : (877)503-6086

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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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
FIX IT AND DID IT CORP**

Certificate of Status	0
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Corporate Filing Menu

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T. BURCH

APR - 8 2021

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: FIX IT AND DID IT CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

842 NE 120TH STBISCAYNE PARK, FL 33161**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL PURPOSES

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARESThe number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JAVIER ANZIL-PName and Title: LEANDRO DELPIEROAddress: 842 NE 120TH ST
BISCAYNE PARK, FL 33161Address: 842 NE 120TH ST
BISCAYNE PARK, FL 33161

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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: JAVIER ANZIL
Address: 842 NE 120TH ST
MIAMI, FL 33161

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: JAVIER ANZIL
Address: 842 NE 120TH ST
MIAMI, FL 33161

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TALLAHASSEE, FLORIDA

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

X

Required Signature/Registered Agent

X

04/06/2021

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.

X

Required Signature/Incorporator

X

04/06/2021

Date