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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : FASTKIT CORP
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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
FABRICIO UPHOLSTERY DESIGN SERVICE CORP**

Certificate of Status	0
Certified Copy	1
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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: FABRICIO UPHOLSTERY DESIGN SERVICE CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6390 W 22 CT NO. 205

6390 W 22 CT NO. 205

HIALEAH, FL 33016

HIALEAH, FL 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANGEL FABRICIO RINCON, PRESIDENT Name and Title: NELLY A RINCO, VICE PRESIDENT

Address: 6390 W 22 CT NO. 205 Address: 6390 W 22 CT NO. 205

HIALEAH, FL 33016 HIALEAH, FL 33016

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 AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ANGEL FABRICIO RINCON
 Address: 6390 W 22 CT NO. 205
HALEAH, FL 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ANGEL FABRICIO RINCON
 Address: 6390 W 22 CT NO. 205
HALEAH, FL 33016

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/16/2021 (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

Angel M Rincon 04/16/2021
 Required Signature/Registered Agent 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.

Angel M Rincon 04/16/2021
 Required Signature/Incorporator Date