

5/4/2021

Division of Corporations

P21000040065

Florida Department of State
Division of Corporations
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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.****

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FLORIDA PROFIT/NON PROFIT CORPORATION**Pary Brothers, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	02
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 NAMEThe name of the corporation shall be: Pary Brothers, Inc.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address11821 NW 11th Court

Mailing address, if different is:

Coral Springs, FL 33071Same**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Sales**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Fedra L. Medina-Haleck, President

Name and Title: _____

Address

11821 NW 11th Court

Address: _____

Coral Springs, FL 33071

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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CLERK OF DISTRICT COURT
NORTH DAKOTA

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: Fedra L. Medina-Halleck
 Address: 11821 NW 11th Court
 Coral Springs, FL 33071

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Fedra L. Medina-Halleck
 Address: 11821 NW 11th Court
 Coral Springs, FL 33071

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

Fedra L. Medina-Halleck 5-4-2021
 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.

Fedra L. Medina-Halleck 5-4-2021
 Required Signature/Incorporator Date

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