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(((H210004464353)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FASTKIT CORP

Account Number : I20100000009

Phone : (305)599-0839

Fax Number

: (305)592-9591

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

3

FLORIDA PROFIT/NON PROFIT CORPORATION

3D & M Farm, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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December 9, 2021

FLORIDA DEPARTMENT OF STATE Division of Corporations

FASTKIT CORP

SUBJECT: 3D & M FARM, INC.

REF: W21000156670

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Line on document hiding address and other information.,

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: B21000446435 Letter Number: 821A00029655

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

RTICLE II PI	rporation shall be: 3D & M Farm,			
	Principal street address	3.4 4.0		
12711 SW 1	38th Street	Maili 	ng address, if differe	nt is:
Miami, FL 33				
RTICLE III PU be purpose for whi		ming		
				<u>-</u>
				-33
<u> </u>				
TCLE IV SHA				DIC-9
CLE V INIT	AL OFFICERS AND/OR DIRECTORS	-		P : 1
	Dario Diverso to	Name and Title:	:	7: 10
Address	12/11 SIM 19946 C4	A Addis.	-	
	Miami, FL 33177	 .		
				
Name and Title		Name and Title	.= -	
Address		A		-
Name and Title:		Name and Title:		
Address			-	
Vogic22		_ Address:		

Name a	nd Title:		
Addres	ad little:	Name and Title:	
Addies		Address:	
			 _
			
ARTICLE VI	REGISTERED AGENT		
The name and FI	orida street address (P.O. Box NOT acceptable		
Name:	De i Di	ie) of the registered agent is:	
(Aame:	Deric Rivera		
Address:	12711 SW 188th Street		
	Miami, FL 33177		
			•
ARTICLE VI 1	NCORPORATOR		
the name and add	ress of the Incorporator is:		
Name:	Deric Rivera		
Address:	12711 SW 188th Street		
	Miami, FL 33177	-	
		_	
ARTICLE VIII EI	FFECTIVE DATE:		
Officetive date, if other	er than the date of filing:	a	
filing.)	is listed, the date must be specific and cann	of he move the (OPTIONAL)	. 50
••	er than the date of filing: Is listed, the date must be specific and cann	or or more man five days prior or 9	0 days after the
Note: If the date inse	erted in this block does not meet the applicable live date on the Department of State's records.		
are document's effect	ive date on the Department of State's records	statutory filing requirements, this dat	C will not the line of
Davis - 1			O IIS TO THE THE TEST THE
certificme I am family	registered agent to accept service of process of		¬ , , ,
з-чте, сат јати	s registered agent to accept service of process for ar willi and accept the appointment as register.	of the above stated corporation at the p	lace designated in this?
_	s registered agent to accept service of process for willi and accept the appointment as registers	agon and agree to act in this capaci	ity The state of t
	_)	:	_
I submit this and	Required Signature/Registered Agent		12/07/2021
document to the Dengel	and affirm that the facts stated herein are t	FUE I am	Date
Zepart	t and affirm that the facts stated herein are a ment of State constitutes a third degree felony	as provided for in a 212 to a	ation submitted in a
<u> </u>		- Joe M. 3.017,133, F.S.	
Required Signature/Inco	prporator		2/07/2021
		Date	5/07/2021