

4/20/22, 11:23 AM
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

P22000030043

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000142984 3)))



H220001429843ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
 Doing so will generate another cover sheet.

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

[Handwritten signature]
 4/21/22

****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
 ORI AIR, INC**

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

RECEIVED

2022 APR 30 PM 12:18

FLORIDA DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 COMMERCIAL SERVICES

2022 APR 20 PM 4:33

Electronic Filing Menu

Corporate Filing Menu

Help

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

ARTICLE I NAMEThe name of the corporation shall be: ORI AIR, INC**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address3105 NW 107 AVEDORAL, FL 33178

Mailing address, if different is:

ARTICLE III PURPOSEThe 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: ORIANNA GONZALEZ, PRESIDENT

Name and Title: _____

Address 2755 SW 33 AVE

Address: _____

MIAMI, FL 33178

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2022 APR 20 AM 1:33

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: ORIANNA GONZALEZ
Address: 2755 SW 33 AVE
MIAMI, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ORIANNA GONZALEZ
Address: 2755 SW 33 AVE
MIAMI, FL 33178

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 4/19/2022 (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

Required Signature/Registered Agent
Date 4/19/2022

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.

Required Signature/Incorporator
Date 4/19/2022

2022 APR 20 AM 14:33