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.

(((H22000149008 3)))



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

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 HOOKAH WHOLESALE CO.

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

ن

Electronic Filing Menu Corporate Filing Menu

Help

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

| TICLE IV SHARES | : - | 2022 APR 25 |
|--|----------------------|-------------|
| Purpose for which the corporation is organized is: ANY AND | ALL LAWFULL BUSINESS | 2022 APR 25 |
| TICLE IV SHARES | :- | 2022 APR 25 |
| ICLE IV SHARES | <u> </u> | |
| CICLE IV SHARES | | |
| number of shares of stock is: 100 SHARES AT \$1.00 PA | RVALUE | PH 5:51 |
| Name and Title: Youssef R. Charaf, President | Name and Title: | |
| 14251 CM/ 120TH CT 4404 | Address: | |
| MIAMI, FL 33186 | | |
| Name and Title: | Name and Title: | |
| Address | | |
| | | |
| Name and Title: | Same and Title: | |
| Address | Address: | · |

| Name a | nd Title: | Name and Title: | |
|--|---|---|---|
| Addres | .s | Address: | |
| | | | |
| | | _ | |
| | | | |
| ARTICLE VI The name and F | REGISTERED AGENT Corida street address (P.O. Box NOT acceptable) | of the registered agent is: | £~3 |
| Name: | Youssef R. Charaf | | 1.022 |
| Address: | 14351 SW 120TH ST #101 | | APR |
| | MIAMI, FL 33186 | , | 25 PH |
| ARTICLE VII | INCORPORATOR | | 27 ù |
| The name and a | ddress of the Incorporator is: | | 5 |
| Name: | Youssef R. Charaf | | , ~ |
| Address: | 14351 SW 120TH ST #101 | - | |
| | MIAMI, FL 33186 | - | |
| Effective date, if | EFFECTIVE DATE: Other than the date of filing: late is listed, the date must be specific and con- | . (OPTIONAL) not be more than five days prior | r or 90 days after the |
| Note: If the date the document's e | inserted in this block does not meet the applicab ffective date on the Department of State's record | le statutory filing requirements, the | nis date will not be listed as |
| certificate, I am f | ned as registered agent to accept service of process amiliar with and accept the appointment as regist ———————————————————————————————————— | for the above stated corporation a ered agent and agree to act in this | ut the place designated in this capacity |
| Yous | set. R. Charat | | 04-22-22 |
| | Required Signature/Registered Agent | | Date |
| I submit this doc document to the i | niment and affirm that the facts stated herein ar Department of State constitutes a third degree felo | e true. I am aware that the faise ny as provided for in s.817.155, F. | information submitted in a .S. |
| Yous Required Signatu | BSEF. R. Charat. | | 04-22-22 |
| | | Date | |