

6/29/22, 1:25 PM

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Division of Corporations
Florida Department of State
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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: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
TECHNOFARM, CORP.**

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

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CORPORATION
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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: TECHNOFARM, CORP.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

100 SW 2nd AVENUE100 SW 2nd AVENUEHALLANDALE BEACH, FL. 33009HALLANDALE BEACH, FL. 33009**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: REAL ESTATE INVESTMENTS**ARTICLE IV SHARES**The number of shares of stock is: 1,000 SHARES AT \$1.00 PAR VALUE**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JUAN CARLOS JIMENEZ, DIR.Name and Title: RUBEN DARIO JIMENEZ, DIR.Address 100 SW 2nd AVENUEAddress: 100 SW 2nd AVENUEHALLANDALE, FL. 33009HALLANDALE, FL. 33009

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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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: CABANAS & ASSOCIATES, P.A.
 Address: 8350 NW 52ND TERRACE - STE. 208
 DORAL, FL. 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

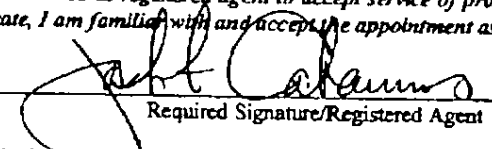
Name: CABANAS & ASSOCIATES, P.A.
 Address: 8350 NW 52ND TERRACE - STE. #208
 DORAL, FL. 33166

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: N/A (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

JUNE 28, 2022

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.


 Required Signature/Incorporator

JUNE 28, 2022

Date

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