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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : VENERABLE CORPORATE AND TRUST SERVICES, LLC
Account Number : 120210000107
Phone : (813)284-4727
Fax Number : (813)436-8460

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

Email Address: jsampson@venerable.law

FLORIDA PROFIT/NON PROFIT CORPORATION

Fast Equity Holdings Corporation

Certificate of Status	0
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Page Count	04
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COVER LETTER

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Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: FAST EQUITY HOLDINGS CORPORATION**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED**FROM:** VENERABLE CORPORATE AND TRUST SERVICES, LLC

Name (Printed or typed)

301 WEST PLATT STREET, NO. 657

Address

TAMPA, FLORIDA 33606

City, State & Zip

813-284-4727

Daytime Telephone number

jsampson@venerable.law

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: FAST EQUITY HOLDINGS CORPORATION**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

301 WEST PLATT STREET, NO. 657301 WEST PLATT STREET, NO. 657TAMPA, FL 33606TAMPA, FL 33606**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ALL LAWFUL PURPOSE**ARTICLE IV SHARES**The number of shares of stock is: 100,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: SAFE EQUITY HOLDING, LLC. OFFICER

Name and Title: _____

Address 30 N GOULD ST. STE R
SHERIDAN, WY 82801

Address: _____

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 AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: VENERABLE CORPORATE AND TRUST SERVICES, LLC
 Address: 301 WEST PLATT STREET, NO. 657
TAMPA, FL 33606

ARTICLE VII INCORPORATORThe name and address of the Incorporator is

Name: VENERABLE CORPORATE AND TRUST SERVICES, LLC
 Address: 301 WEST PLATT STREET, NO. 657
TAMPA, FL 33606

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**Jason Sampson*

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.**Jason Sampson*

Required Signature/Incorporator

Date