

2/9/23, 1:02 PM

**L23000010437**

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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

From: Account Name : FASTKIT CORP  
Account Number : 120100020009  
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  
EMPIRE GROUP HOMES, CORP.**

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

9:11 AM

23 FEB -9 01:02:55

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Corporate Filing Menu

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

ARTICLE I NAME

The name of the corporation shall be: EMPIRE GROUP HOMES, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address  
1235 N KROME AVE  
HOMESTEAD FL 33030

Mailing address, if different is:  
1235 N KROME AVE  
HOMESTEAD FL 33030

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES AT \$1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ernesto Diaz Medina, President

Address: 1235 N KROME AVE  
HOMESTEAD, FL 33030

Name and Title: Ornar Sanchez Guevara, Secretary & Treasurer

Address: 1235 N KROME AVE  
HOMESTEAD, FL 33030

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: Ernesto Diaz Medina  
 Address: 1235 N KROME AVE  
HOMESTEAD, FL 33030

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ernesto Diaz Medina  
 Address: 1235 N KROME AVE  
HOMESTEAD, FL 33030

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.*

Ernesto Diaz Medina

Required Signature/Registered Agent

01/08/2023  
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.*

Ernesto Diaz Medina

Required Signature/Incorporator

01/08/2023  
Date