

p2900001140

Division of Corporations
Electronic Filing Cover Sheet

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.

((H23000054322 3))



H230000543223ABCV

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 GO COMMERCIAL CORP

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

2023 - 10 PM 2:41

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

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: GO COMMERCIAL CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

16500 SW 103 PL
MIAMI, FL 33157

Mailing address, if different is:

16500 SW 103 PL
MIAMI FL 33157

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RANIEL OLIVA GONZALEZ

Name and Title: _____

Address: 16500 SW 103 PL

Address: _____

MIAMI, FL 33157

PRESIDENT (50 SHARES)

Name and Title: VIVIAN GARCIA CUBILLAS

Name and Title: _____

Address: 16500 SW 103 PL

Address: _____

MIAMI, FL 33157

VICEPRESIDENT (50 SHARES)

Name and Title: _____

Name and Title: _____

Address: _____

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: VIVIAN GARCIA CUBILLAS

Address: 16500 SW 103 PL
MIAMI, FL 33157

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RANIEL OLIVA GONZALEZ

Address: 16500 SW 103 PL
MIAMI, FL 33157

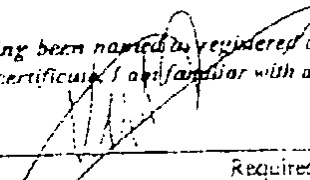
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: FEBRUARY 09, 2023 (OPTIONAL)

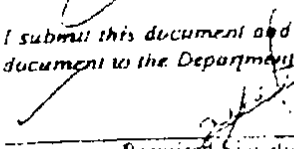
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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:

X  _____ 02/07/2023
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.

 _____ 02/07/2023
Required Signature/Incorporator Date