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Division of Corporations

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

From:

Account Name : FASTKIT CORP
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CORPORATIONS
COMMERCIAL
SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
GIUSEPPE A. BORGIA, PA

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

MICHELLE J. JONES
TALLAHASSEE, FLORIDA

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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: GIUSEPPE A. BORGIA, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8319 NW 49TH ST.

8319 NW 49TH ST.

DORAL, FL. 33166

DORAL, FL. 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE AGENT

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: GIUSEPPE A. BORGIA, PR

Name and Title: _____

Address 8319 NW 49TH ST.

Address: _____

DORAL, FL. 33166

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE, FLORIDA

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: GIUSEPPE A. BORGLA
 Address: 8319 NW 49TH ST
 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.

X [Signature]
 Required Signature/Registered Agent

APR 13 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.

[Signature]
 Required Signature/Incorporator

APRIL 13, 2023
 Date