

5/2/23, 11:51 AM

Division of Corporations

Florida Department of State
Division of Corporations
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To:

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

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**FLORIDA PROFIT/NON PROFIT CORPORATION
J&R WHOLESALE SOLUTION INC.**

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

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Help

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

ARTICLE I NAMEThe name of the corporation shall be: J&R WHOLESALE SOLUTION INC.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address
6530 W 27 AVE APT 24
HIALEAH, FL 33016Mailing address, if different is:
SAME ADDRESS**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: WHOLESALE**ARTICLE IV SHARES**The number of shares of stock is: 100 SHARES PER VALUE \$1.00**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JAVIER GARCIA CARMONA

Name and Title: _____

Address 6530 W 27 AVE APT 24

Address: _____

HIALEAH, FL 33016PRESIDENT

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: JAVIER GARCIA CARMONA

Address: 6530 W 27 AVE APT 24
HIALEAH, FL 33016

ARTICLE VII INCORPORATORThe name and address of the incorporator is:

Name: JAVIER GARCIA CARMONA

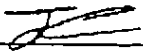
Address: 6530 W 27 AVE APT 24
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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

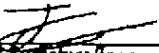
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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*


 Required Signature/Registered Agent

04/24/2023
 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.


 Required Signature/Incorporator

04/24/2023
 Date