5/26/23

P23000041515

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 : 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.

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
VERSAILLES SERVICES, INC.

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

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:

VERSAILLES SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address:

6055 W. 19 Ave., Apt. 221
Hialeah, FL 33012

Mailing address, if different:

6055 W. 19 Ave., Apt. 221
Hialeah, FL 33012

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:

1,000 shares authorized, 100 shares issued and outstanding

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Maite Arango Rivero - President**
Address **6055 W. 19 Ave., Apt. 221**
Hialeah, FL 33012

Name and Title:
Address

Name and Title:
Address

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ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agents is:

Name: **Maite Arango Rivero**
Address: **6055 W. 19 Ave., Apt. 221**
Hialeah, FL 33012

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: **Maite Arango Rivero**
Address: **6055 W. 19 Ave., Apt. 221**
Hialeah, FL 33012

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

Signature/Registered Agent — Date: 05/25/2023

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/Incorporator — Date: 5/25/2023

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