Jan 103 2024 17:32 HP Fax 1/3/24, 2:46 PM

Florida Department of State

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.

(((H24000002700 3)))



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 : I2010000009

: (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. \*\*

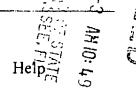
Email Address:

## FLORIDA PROFIT/NON PROFIT CORPORATION MUEVETE PAQUETE INC

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

Electronic Filing Menu

Corporate Filing Menu



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

ARTICLE II PR	INCIPAL OFFICE Principal street address	Mailin	ig address, if different is:
1630 W 46TH 3		•	THIST APT 305
HIALEAH, FL	33012	HIALEAH, I	FL 33012
ARTICLE III PUI The purpose for whi	RPOSE ch the corporation is organized is: MULTI	SERVICES	
RTICLE V INI	and stock is: 100 SHARES  TIAL OFFICERS AND/OR DIRECTORS	REZiame and Title:	
he number of shares	s of stock is: 100 SHARES		
he number of shares  **RTICLE V INT  Name and T	TIAL OFFICERS AND/OR DIRECTORS  Title: SOLANGE CORONA JE		
he number of shares  **RTICLE V INT  Name and T	TIAL OFFICERS AND/OR DIRECTORS Title: SOLANGE CORONA JE 1630 W 46TH ST APT 30	Address:	
he number of shares  RTICLE V INI  Name and T  Address	TIAL OFFICERS AND/OR DIRECTORS  Title: SOLANGE CORONA JE  1630 W 46TH ST APT 30  HIALEAH, FL 33012  PRESIDENT (50 SHARE	05 Address:	
he number of shares  **RTICLE V INT  Name and T  Address  Name and Ti	TIAL OFFICERS AND/OR DIRECTORS Citle: SOLANGE CORONA JE 1630 W 46TH ST APT 30 HIALEAH, FL 33012	DS Address:  ES)  L VALDES Title:	
he number of shares  RTICLE V INI  Name and T  Address	TIAL OFFICERS AND/OR DIRECTORS  Title: SOLANGE CORONA JE  1630 W 46TH ST APT 30  HIALEAH, FL 33012  PRESIDENT (50 SHARE  itle: JENNIFFER L. QUINTANA  1630 W 46TH ST APT 305	D5 Address:  ES)  L VALDES Title:	
he number of shares  **RTICLE V INT  Name and T  Address  Name and Ti	TIAL OFFICERS AND/OR DIRECTORS TITLE: SOLANGE CORONA JE  1630 W 46TH ST APT 30  HIALEAH, FL 33012  PRESIDENT (50 SHARE  1630 W 46TH ST APT 305  HIALEAH, FL 33012	DS Address:  ES)  L VALDES Title:  Address:	
he number of shares  **RTICLE V INT  Name and T  Address  Name and Ti	TIAL OFFICERS AND/OR DIRECTORS  Title: SOLANGE CORONA JE  1630 W 46TH ST APT 30  HIALEAH, FL 33012  PRESIDENT (50 SHARE  itle: JENNIFFER L. QUINTANA  1630 W 46TH ST APT 305	DS Address:  ES)  L VALDES Title:  Address:	7024 JA (550) (7.71)
he number of shares  **RTICLE V INT  Name and T  Address  Name and Ti  Address	TIAL OFFICERS AND/OR DIRECTORS TITLE: SOLANGE CORONA JE  1630 W 46TH ST APT 30  HIALEAH, FL 33012  PRESIDENT (50 SHARE  1630 W 46TH ST APT 305  HIALEAH, FL 33012	DS Address:  ES)  L VALDES Title:  Address:  HARES)	7024 )

Name and	Title: Name and T	itle:
Address	Address:	-
<u>ARTI</u> ÇLE VI R	ECISTEDED ACENT	
The name and Flo	EGISTERED AGENT rida street address (P.O. Box NOT acceptable) of the registered in the registered of the registered in the registered of t	agent is:
Name:	JENNIFFER L. QUINTANAL VALDE	
Address:	1630 W 46TH ST APT 305	024 B
	HIALEAH, FL 33012	FILL 1
ARTICLE YIL I	NCORPORATOR	3 MIO: 49
The name and add	tress of the Incorporator is:	<u> </u>
Name:	SOLANGE CORONA JEREZ	PATE 59
Address:	1630 W 46TH ST APT 305	• •
	HIALEAH, FL 33012	
Effective date, if ot	FFECTIVE DATE: her than the date of filing: JANUARY 01, 2024	OPTIONAL)
filing.)	e is listed, the date must be specific and cannot be more than	i five days prior or 90 days after the
Note: If the date in	serted in this block does not meet the applicable statutory filing	requirements, this date will not be listed as
the document's effe	ctive date on the Department of State's records.	
Having been named certificate, I am fan	as registered agent to accept service of process for the above state alliar with and accept the appointment as registered agent and ag	ed corporation at the place designated in thi ree to act in this capacity
Buildens		12/22/2023
	Required Signature/Registered Agent	Date
l submit this docun document to the Dep	nent and affirm that the facts stated herein are true. I am awai partment of State constitutes a third degree felony as provided for	re that the false information submitted in a in.s.817.155, F.S.
Some	T .	12/22/2023
Required Signature	Incorporator	Date