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

From:
Account Name : FASTKIT CORP
Account Number : 120100000009
Phone : (305)599-0839
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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.

Email Address: _____

RECEIVED
2024 MAY -9 PM 2:52
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
LULEMM SERVICE AND REPAIR INC

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

2024 MAY -9 PM 1:17
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

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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: LULEMM SERVICE AND REPAIR INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

8766 NW 140TH LANE
MIAMI LAKES, FL 33018

Mailing address, if different is:

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: GELKA ACUNA

Name and Title: PRESIDENT

Address: 8766 NW 140TH LANE
MIAMI LAKES, FL 33018

Address:

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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STATE OF FL

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: GELKA ACUNA
Address: 8766 NW 140TH LANE
MIAMI LAKES, FL 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GELKA ACUNA
Address: 8766 NW 140TH LANE
MIAMI LAKES, FL 33018

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.

X _____
Required Signature/Registered Agent

5/6/24.
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.

X _____
Required Signature/Incorporator

5/6/24.
Date

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STATE