

6/14/24, 3:56 PM

Division of Corporations

P24000040606

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.

((H24000208741 3)))



H240002087413ABC

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 : 120100000009
Phone : (305)599-0839
Fax Number : (305)592-9591

FILED
2024 JUN 14 PM 1:50
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
JUN 14
CHATHAM
ABLE AND/OR VIDEO
FRANCHISING

****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 JUN 14 PM 4:29
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

**FLORIDA PROFIT/NON PROFIT CORPORATION
LATINOS WHEEL CAPITAL CORP**

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: LATINOS WHEEL CAPITAL CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5125 E 10 AVE STE B

5125 E 10 AVE STE B

HIALEAH, FL 33013

HIALEAH, FL 33013

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FINANCING SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIO Y. DIAZ ACOSTA

Name and Title: _____

Address 5125 E 10 AVE STE B

Address: _____

HIALEAH, FL 33013

PRESIDENT (50 SHARES)

Name and Title: MAIKEL DIAZ ACOSTA

Name and Title: _____

Address 5125 E 10 AVE STE B

Address: _____

HIALEAH, FL 33013

VICE-PRESIDENT (50 SHARES)

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
2024 JUN 14 PM 1:50
CABLE AND/OR VIDEO
DIVISION OF CORPORATIONS
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: MARIO Y. DIAZ ACOSTA
 Address: 5125 E 10 AVE STE B
HIALEAH, FL 33013

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIO Y. DIAZ ACOSTA
 Address: 5125 E 10 AVE STE B
HIALEAH, FL 33013

FILED
 2024 JUN 14 PM 1:50
 CABLE AND/OR VIDEO
 FRANCHISING
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

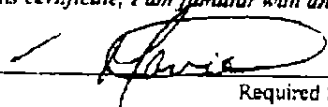
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JUNE 14, 2024 (OPTIONAL)

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

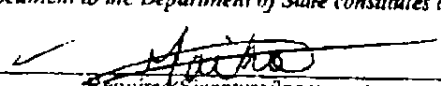
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

JUNE 14, 2024
 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

JUNE 14, 2024
 Date