

P2500058733

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
FLITE CORP**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL
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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: FLITE CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address
10 NE 2ND AVE
MIAMI, FL 33131

Mailing address, if different is:
SAME

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 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RUDOLPH ATHOURISTE - P

Address: 10 NE 2ND AVE
MIAMI, FL 33131

Name and Title: RICARDO ATHOURISTE - VP

Address: 10 NE 2ND AVE
MIAMI, FL 33131

Name and Title: SAMUEL ATHOURISTE - T

Address: 10 NE 2ND AVE
MIAMI, FL 33131

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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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: RUDOLPH ATHOURISTE
 Address: 10 NE 2ND AVE
MIAMI, FL 33131

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RUDOLPH ATHOURISTE
 Address: 10 NE 2ND AVE
MIAMI, FL 33131

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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

W _____ 10-22-2025
W (Oct 22, 2025, 16:44:35 EDT) Required Signature/Registered Agent 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.

W _____ 10-22-2025
W (Oct 22, 2025, 16:44:35 EDT) Required Signature/Incorporator Date