

L 14000162425

Division of Corporations

http://efile.sunbiz.org/scripts/efilecovr.exe

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.

((H14000243925 3)))



H140002439253ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED

14 OCT 17 PM 12:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

2014 OCT 17 AM 8:05
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 LIMITED LIABILITY CO.
EMINIC CAPITAL, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

K. SALY
EXAMINER
OCT 20 2014

FILED

2014 OCT 17 AM 8:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I:

The name of the Limited Liability Company is:

EMINIC CAPITAL, LLC

ARTICLE II-ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is:

Physical & Mailing Address:
100 Madeira Avenue, Suite 1
Coral Gables, FL 33134

ARTICLE III-Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Professional Financial Services, LLC

Name

100 Madeira Avenue, Suite 1

Florida street address (P.O. Box not acceptable)

Coral Gables, FL 33134

City, State, and Zip

FILED

2014 OCT 17 AM 8:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605 F.S.



Registered Agent's Signature

ARTICLE IV-Management (Check box if applicable)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

(An additional article must be added if an effective date is requested)



Signature of a member or an authorized representative of a member

(In accordance with section 605.0203, Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.).

Teresita F. Miyares

Typed or printed name of signee