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.

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To:

Division of Corporations

Fax Number : (850)617-6383

Effective Date 4-14-12

From:

Account Name : FASTKIT CORP Account Number: I20100000009

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

\*\*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. GEYA CONSTRUCTION LLC.

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\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

J. SAULSBERRY APR 17 2012

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LUBILITY COMPANY

ARTICLE I - Name:

(Must and with the words "Limited Liability Company, "LLC.," or "LLC."  ARTICLE II - Address: The mailing saddress and street address of the principal office of the Limited Liability Company is:				
			Principal Office Address:	Mailing Address:
			320/ 43 Sf. SW  LEF HI SH A CRES F/  33976  ARTICLE III - Registered Agent, Re (The Limited Limitity Company cannot serve as its trustness entity with an active Plotida registration.)	Jool 43 Sf. SW  LEE HIEL ACRES F  33976  Oglistered Office, & Registered Agent's Signature: own Registered Agent. You must designed an individual or enjoyed.
	s of the recisioned agent are:			
The name and the Florida street address				
ENR	Name Nouzoq			
3001 43 St Florida	Name Name  SW  A street address (P.O. Box NOT accept ble)			
3001 43 St Florida	Name Nouvey			

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 608, P.S.

EURIQUE MONZOU

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MOR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 04-14-12-(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) REQUIRED SIGNATURE: BURISHE HOURA Signature of a member of an authorized representative of a member.

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated berein are true. I am aware that any false information submitted in a document to the Department of State

EURI 906 MOUROY

ARTICLE IV- Manager(s) or Managing Member(s):

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

constitutes a third degree falony as provided for in s.817.155, P.S.)