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.

(((H22000053311 3)))



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 : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

2022 FEB 14

# FLORIDA LIMITED LIABILITY CO. POLICANE ALLIANCE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

page 2

850-617**-6**381

2/11/2022 9:51:54 AM PAGE 1/001 Fax Server



February 11, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FASTKIT CORP

SUBJECT: POLICANE ALLIANCE, LLC

REF: W22000016120

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: H22000053311 Letter Number: 122A00003432

## ARTICLES OF ORGANIZATION

#### OF

## POLICANE ALLIANCE, LLC

These Articles of Organization of a Limited Liability Company under Florida Statutes Chapter 605 are made and entered into as of the \_\_\_\_\_\_ day of \_\_Fcb\_\_ 2022.

#### ARTICLE I

Name: The name of the limited liability company is:

# POLICANE ALLIANCE, LLC

## ARTICLE II

<u>Duration:</u> The company shall be perpetual from the date hereof, unless earlier terminated in accordance with Florida Statutes Chapter 605.

#### ARTICLE III

Address: The address of the company principal office and mailing address shall be:

## 1800 CORAL WAY, # 452733 MIAMI, FL 33245

#### ARTICLE IV

Register Avent and Address: The name and address of the initial register agent is:

ANGEL D. CORDOVA 780 N.W. 42<sup>ND</sup> AVE. -- STE 325 MIAMI, FL 33126

## ARTICLE V

New Members: The members may admit new members upon agreement of the members-upon terms determined hereafter by the members.

## ARTICLE VI

Continuation: Upon occurrence of an event listed in Florida Statute 605.0203(1)(b), the then existing and/or non-bankrupt members may continue the business of the company, if all agree to do so.

Page 2

#### ARTICLE VII

Management: The company shall be managed by its designated managers until the first annual meeting of the members or until a successor is elected and qualifies. The designated manager(s) names and addresses is/are as follows:

Manager: SILVIA SERRANO 1800 CORAL WAY #452733, MIAMI, FL 33245

## ARTICLE VIII

Powers: This Company shall have powers listed in Florida Statute 605.

### ARTICLE IX

Transferability: No member may transfer his, her or its interest in the company without the consent of the other members.

#### ARTICLE X

Regulations: The members shall have the power to adopt, alter, amend, or repeal regulations of the Company containing provisions for the regulations and management of the affairs of the company.

## ARTICLE XI

Arbitration: Dispute among members shall be settled by arbitration in Miami, Florida, pursuant to the rules and procedures of the American Arbitration Association.

The undersigned, being the initial subscriber of these Articles of Organization, for the purpose of forming a limited liability company, do make, subscribe, acknowledge, and file these Articles of Organization hereby declaring and certifying that the articles herein stated are correct.

SILVIA SERRANO INCORPORATOR 5 T. F. T.

Page 3

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0203(1)(b), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATION THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the limited liability company is:

# POLICANE ALLIANCE, LLC

2. The name and address of the registered agent and office is:

ANGEL D. CORDOVA 780 N.W. 42<sup>ND</sup> ST – STE 325 MIAMI, FL 33126

Having been named as registered agent and to accept services 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.

Dated as of this 9 day of Feb 2022.

Signed by:

ANGEL D. CORDOVA
REGISTERED AGENT

. 30 Ec. 1 | 1 | 1 | 1 | 1 | 2 | 1

ŧ