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Florida Department of State  
Division of Corporations  
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*Basic*

To:  
Division of Corporations  
Fax Number : (850) 205-0383

From:  
Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

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DIVISION OF CORPORATIONS

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**K & G FINISH & CARPENTRY LLC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
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*JSB*

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

K & G FINISH & CARPENTRY LLC.

**ARTICLE II - Address:**

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

**Principal Office Address:**

**Mailing Address:**

8004 NW. 154 ST.  
MIAMI LAKES, FL. 33016

8004 NW. 154 ST.  
MIAMI LAKES, FL. 33016

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

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

MAYTE RIVAS DEL MARMOL

Name


17260 NW. 91 FL.

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

HIACLEAH FL 33018

City, State, and Zip

*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, F.S.*

  
\_\_\_\_\_  
Registered Agent's Signature

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**ARTICLE IV- Manager(s) or Managing Member(s):**  
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
"MGR"	MAYTE RIVAS DEL MARMOL 17260 NW. 91 PL. HIALEAH, FL. 33018
" MGRM "	REINA M. PAGES 17260 NW. 91 PL. HIALEAH, FL. 33018

(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**



Signature of a member or 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 herein are true.)

MAYTE RIVAS DEL MARMOL

Typed or printed name of signer

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