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SECRETARY OF STATE

EFFECTIVE DATE 2-107

Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BASKIT, LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: **Elizabeth Bradley Litchens** (Name of Person)
(Firm/Company)
200 N. Bel Air Duve
Plantation, FL 33317 (City/State and Zip Code)
For further information concerning this matter, please call:
Elizabeth Bradley litchens at (954) 415-2752 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

$\mathcal B$	ASKIT, LLC		
		ited Company" or their abbreviation "L	LC," or "L.C.,")
ARTICLE II - Add		orincipal office of the Limited	l Liability Company is:
Principal Office A	ddress:	Mailing Address:	
200 N. Bel Clantation	! Air Drive -FL 33317	Same	
(The Limited Liability Co		ed Office, & Registered Age istered Agent. You must designate an in	
The name and the F	Florida street address of the **Bit Tabe H. Bit Name Name	radicy ketchens	07 JAN 31 SECRETAR) TALLAHASSI
	200 N. Bel,	Air Drive	
	Plantation	ddress (P.O. Box <u>NOT</u> acceptable)	STATE LORIDE
	City, State,	, and Zip	Σ… ω

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 Agends Signature (REQUIRED

EFFECTIVE DATE 2-107

ARTICLE I - Name:

The name of the Limited Liability Company is:

(CONTINUED) Page 1 of 2

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Elizabeth Bradley Clickens 200 N. Bel Air Drive Planta From El 33317
marm	Steven Joseph Kitchens 200 N. Bel Air Dure Plantation Fl 33317
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than (If an effective date is listed, the date musto or 90 days after the date of filing.)	the date of filing: <u>February</u> 1,2007. (OPTIONAL) st be specific and cannot be more than five business days prior
<u>REQUIRED</u> SIGNATURE:	0 IAL
_ Prace	lley Stehens
Signatúre of a me	mber of an authorized representative of a member. See 🔀 💆 🚎

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)