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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335 ; (305:599-0839 Phone

Fax Number : (305)716-0346

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CJ CONSULTING OF AMERICA., LLC.

Certificate of Status	0
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Corporate Filing Menu

Help

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ARTICLES OF ORGINIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address: The mailing address and street address of the principle office of the Limited Liability Company is:	
rinciple Office Address:	Mailing Address:
7332 N NATURE TRAIL	7332 N NATURE TRAIL
HERNANDO . FL 34442	HERNANDO, FL 34442
,	

UKISTENA RUBERTS

Name

7332 N NATURE TRAIL

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

BERNANDO, FL 34442

City, State, and Zip

Having been named as registered agent and to accept service of process for 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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV - Manager(s) or Managing Member (s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Manager "MGRM" = Managing Member MGRM CHRISTENA ROBERTS 7312 N NATURE TRAIL HERNANDO, FL 34442 (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 penalties of perjury

Typed or printed name of signed

that the facts stated herein are true.)

CHRISTENA ROBERTS, AND

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