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To:

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

From:

Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

FLORIDA/FOREIGN LIMITED LIABILITY CO.

KASAS FINANCIAL SERVICES, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is:
KASAS FINANCIAL SERVICES, LLC

ARTICLE II- Address:

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

Principal Office Address:

2240 NW 87 AVE
DORAL, FL 33172

Mailing Address:

9832 COSTA DEL SOL BLVD
DORAL, FL 33178

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

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

<u>Title</u>	<u>Name and Address:</u>
JUAN DIAZ- MANAGING MEMBER	9832 COSTA DEL SOL BLVD. DORAL, FL 33178
LYLIANA MUNGARRIETA- MANAGING MEMBER	9832 COSTA DEL SOL BLVD DORAL, FL 33178

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ARTICLE IV- Registered Agent, Registered Office & Registered Agent's Signature:


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

Joseph F. Cabanas
Name

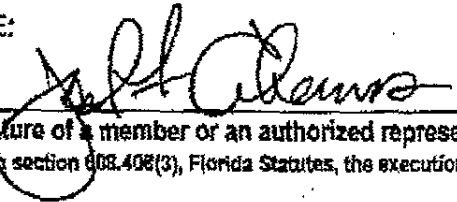
10520 NW 26th Street- Suite C201
Florida Street Address

Doral, FL 33172
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 certificated, 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 (Required)

ARTICLE V: Effective date, if other than the date of filing: _____ (optional)

SIGNATURE:

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution that the facts stated herein are true)

Joseph F. Cabanas
Type or printed name of signee.

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