

Corporations **L08000009032** Page 1 of 1

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To: Division of Corporations
Fax Number : (850) 617-6383

From:

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

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08 JAN 25 AM 8:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

KENDY - 3, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is:

KENDY - 3, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or abbreviation "LLC," or "L.C.")

ARTICLE II- Address:

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

Principal Office Address:

10520 NW 26 ST. C-201
DORAL, FL 33172

Mailing Address:

10520 NW 26 ST. C-201
DORAL, FL 33172

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

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

Title

Name and Address:

MGRM

**INVERSIONES INTERNACIONALES DEL IRAZU SOCIEDAD
ANONIMA.**
CANTON CENTRAL, BARRIO ESCALANTE HOUSE # 3365
SAN JOSE, COSTA RICA

MGRM

LUIS BLANCO JEREZ
10520 NW 26 ST. C-201
DORAL, FL 33172

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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 ~ Cabanas & Associates

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: _____

SIGNATURE:



Signature of a member or an authorized representative of a member,

(In accordance with section 808.408(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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TALLAHASSEE FLORIDA

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