Division of Corporations Public Access System

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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

FLORIDA/FOREIGN LIMITED LIABILITY CO.

FAMILY & FRIENDS INVESTMENTS LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
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JUL 15 2008

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is:

FAMILY_&_FRIENDS_INVESTMENTS_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: 3500 N STATE RD 7. STE. 439

LAUDERDALE LAKES, FL 33319

Mailing Address:

SAME

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

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

<u>Title</u>

Name and Address:

MANAGING MEMBER

MICHAEL D. MICHEL

3141 NW 47th TERR. # 120

LAUDERDALE LAKES, FL 33319

MANAGING MEMBER.

JEAN RENE MORICETTE

3089 NW 71 AVE MARGATE, FL 33063 (Use attachment if necessary)

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

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

JEAN RENE MORICETTE

Name 3089 NW 71ST AVE

Florida Street Address

MARGATE, FL 33063 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 statures 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: 7/14/08 (optional)

SIGNATURE:

Signature of a member of an authorized representative of a member.

(in accordance with section 608.408(3), Florida Statutes, the execution that the facts stated herein are true)

JEAN RENE MORICETTE

Type or printed name of signee.