

Division of Corporations

LC 9000016233

Florida Department of State

Division of Corporations

Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H09000036940 3)))



H090000369403ABC+

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 FEB 17 AM 11:06

FILED

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**MIAMI PROPERTY SOLUTIONS, LLC**

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

**S. HAWKES**

FEB 18 2009

**EXAMINER**

RECEIVED

09 FEB 17 PM 3:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF ORGANIZATION FOR  
MIAMI PROPERTY SOLUTIONS, LLC**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

**MIAMI PROPERTY SOLUTIONS, LLC**

**ARTICLE II - Address**

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

**Principal Office Address:**  
1604 Pennsylvania Avenue  
Unit #1  
Miami Beach, Florida 33139

**Mailing Address:**  
1604 Pennsylvania Avenue  
Unit #1  
Miami Beach, Florida 33139

**ARTICLE III - Registered Agent, Registered Office,  
& Registered Agent's Signature**

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

**Edna Morales-Rodriguez, Esq.**  
1451 N.W North River Drive  
Miami, Florida 33125

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

**FILED**  
09 FEB 17 AM 11:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature:

  
Dana Morales-Rodriguez

#### ARTICLE IV- Manager

The name and address of each Manager is as follows:

Name and Address

Title

ALEXKEY SABIDO

MGR/MBR

1604 Pennsylvania Avenue

Unit #1

Miami Beach, Florida 33139

EDWARD MILLER

MGR/MBR

1604 Pennsylvania Avenue

Unit #1

Miami Beach, Florida 33139

#### ARTICLE V: Effective date

The effective date of the Articles of Organization is:

February 11, 2009

  
ALEXKEY SABIDO, Manager

  
EDWARD MILLER, Manager

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FILED  
09 FEB 17 AM 11:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02/17/2009

12:19

HARPER KYNES GELLER PA → 18506176383

NO.196 D01

Division of Corporations

Page 1 of 1

**L0900016236**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H09000036546 3)))



H090000365463ABCD

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

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

From:

Account Name : HARPER, KYNES & GELLER, P.A.  
Account Number : 070651000745  
Phone : (727)799-4840  
Fax Number : (727)797-8206

**FILED**  
09 FEB 17 AM 11:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**Sunshine State Infrared, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

**S. HAWKES**  
FEB 18 2009  
**EXAMINER**

**RECEIVED**

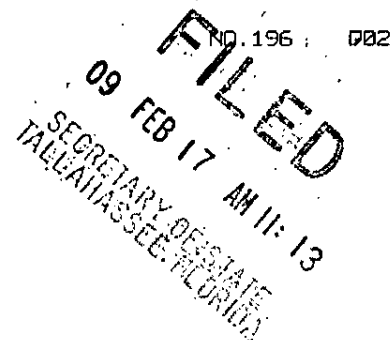
09 FEB 17 PM 2:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help



**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME**

The name of the Limited Liability Company is: **Sunshine State Infrared, LLC**

**ARTICLE II - ADDRESS**

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

Mailing Address: Post Office Box 55095  
St. Petersburg, FL 33732

Physical Address: 9723 Oak Street NE  
St. Petersburg, FL 33702

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE,  
& REGISTERED AGENT'S SIGNATURE**

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

Scott Kaylor  
9723 Oak Street NE  
St. Petersburg, FL 33702

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.

  
Scott Kaylor, Registered Agent

**ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company.

**ARTICLE V - MANAGER**

The name and address of each Manager is as follows:

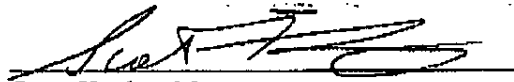
Title:

Manager

Name and Address:

Scott Kaylor  
9723 Oak Street NE  
St. Petersburg, FL 33702

FILED  
09 FEB 17 AM 11:13  
SECRETARY OF REVENUE  
TALAMON SCOTT  
TALAMON SCOTT

  
Scott Kaylor, Manager

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Scott Kaylor  
Typed or printed name of signee