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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

Effective Date 9/3/09

From:

A A

Account Name :

Account Name : FASTKIT CORPORATE OUTFITS

Account Number: 071001002335

Phone : (305)599-0839 Fax Number : (305)716-0346

LAHASSEE,

ORIDA/FOREIGN LIMITED LIABILITY CO.

TELAUDITORS, LLC.

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

Electronic Filing Menu

Corporate Film AMPTON

Help

SEP - 8 2009

EXAMINER

9/4/2009

ARTICLE I - Name:	·
The name of the Limited Liability Cor	mpany is:
	JDITORS, LLC.
(Must end with the words "Li	imited Liability Company," "L.L.C.," or "LLC.")
ARTICLE П - Address:	
	s of the principal office of the Limited Liability Company is:
.	
Principal Office Address:	Mailing Address:
960 NE 175 STREET	960 NE 175.STREET
MIAMI, FL 33162	MIAMUEL 33162
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, R The Limited Liability Company cannot serve as it business entity with an active Florida registration.	s own Registered Agent. You must designate an individual or another
The Limited Liability Company cannot serve as it	s own Registered Agent. You must designate an individual or another.
The Limited Liability Company cannot serve as it business entity with an active Florida registration.	s own Registered Agent. You must designate an individual or another.
The Limited Liability Company cannot serve as it business entity with an active Florida registration.	s own Registered Agent. You must designate an individual or another ss of the registered agent are:
The Limited Liability Company cannot serve as it business entity with an active Florida registration. The manne and the Florida street address	s own Registered Agent. You must designate an individual or another ss of the registered agent are: LILIAN FISH
The Limited Liability Company cannot serve as it business entity with an active Florida registration. The mame and the Florida street addresses the serve and the Florida street addresses and the Fl	s own Registered Agent. You must designate an individual or another ss of the registered agent are: LILIAN FISH Name
The Limited Liability Company cannot serve as it business entity with an active Florida registration. The mame and the Florida street addresses the serve and the Florida street addresses and the Fl	s own Registered Agent. You must designate an individual or another ss of the registered agent are: LILIAN FISH Name NE 175 STREET Idress (P.O. Box NOT acceptable)

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):	
The name and address of each Manager or Managing Member is as follo-	W5

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing	g Member
MGR	LILIAN FISH
	960 NE 175 STREET
	MIAMI, FL 33162
,	

•	
(Use attachment if not ICLE V: Effective date,	if other than the date of filling: 09/03/2009 (OPTIONAL)
n effective date is listed, t 90 days after the date of	the date must be specific and cannot be more than five business days p filing.)
REQUIRED SIGNA	TURE: Language of a morpher or an authorized representative of a member.
(In a of t	accordance with section 608.408(3), Florida Statutes, the execution his document constitutes an affirmation under the penalties of perjury the flots stated herein are true.)
	LILIAN FISH
Tille or Francis	Typed or printed name of signce
Filing Fees:	
\$125.00 Filling Fee fo	
	r Articles of Organization and Designation
of Registere	d Agent
	d Agent py (Optional)

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