Page 1 of 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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FLORIDA LIMITED LIABILITY CO. GLMS INVESTMENT GROUP, LLC

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Certificate of Status	0
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Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help '

https://efile.sunbiz.org/scripts/efilcovr.exe

JAN 28 2011 N. Cultigan

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Registered Agent, as provided for in Chapter 608, F.S.

	(Must end with the words "I	Limited Liability Company, "L.L.C.," or "LLC.")	
RTICLE II -			
The mailing add	ress and street addres	ss of the principal office of the Limited Liabi	lity Company is
Principal Offic	e Address:	Mailing Address:	
0710 NW 66TH ST	#308	10710 NW 86TH ST #308	:
ORAL, FL 33178		DORAL, FL 33178	· · · · · · · ·
Tue rimited rimbilità	Registered Agent, l Company cannot serve as an active Florida registration	Registered Office, & Registered Agent's Si its own Registered Agent. You must designate an individua m.)	gnature 3
business entity with	an active Florida registration E Florida street addre	ess of the registered agent are:	or anomec 2
business entity with	an active Florida registration E Florida street addre	to own Registered Agent. You must designate an individual m.) ess of the registered agent are: NAS - CABANAS & ASSOCIATES, P.A.	gnature of the state of the sta
business entity with	an active Florida registration E Florida street addre	ess of the registered agent are:	or anomec 2
business entity with	an active Florida registration The Florida street addresses and JOSEPH F. CABAN	to own Registered Agent. You must designate an individual m.) ess of the registered agent are: NAS - CABANAS & ASSOCIATES, P.A.	or anomec 2
business entity with	an active Florida registration te Florida street address JOSEPH F. CABAN 10520 NW 26Th	ess of the registered agent You must designate an individua m.) ess of the registered agent are: NAS - CABANAS & ASSOCIATES, P.A. Name	or anomec 2
business entity with	an active Florida registration te Florida street address JOSEPH F. CABAN 10520 NW 26Th	to own Registered Agent. You must designate an individual m.) ess of the registered agent are: NAS - CABANAS & ASSOCIATES, P.A. Name H ST, STE C-201	or anomec 2

Registered Agent's Signature (Required)

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

(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 follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM LO MONACO S, GASPARE 10710 NW 66TH ST #308 DORAL, FL 33178 MGRM CARUSO DE LO MONACO, GIOVANNA 10710 NW 66TH ST #308 **DORAL, FL 33178** LO MONAÇO C, VINCENZO MGRM 10710 NW 68TH ST #308 DORAL, FL 33178 MGRM LO MONAÇO C, FABIOLA 10710 NW 66TH ST #308 DORAL, FL 33178 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be more than five business days to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member

Filing Foes:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

LO MONACO C, VINCENZO

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

Typed or printed name of signee

Title:
"MGR" = Manager
"MGRM" = Managing Member

MGR

Name and Address:

LO MONACO, GIUSEPPINA 10710 NW 66TH ST #308 DORAL, FL 33178