# LI O Peda pariment of the 462 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.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009

Phone : (305)599-0839 Fax Number : (305)592-9591

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:				
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I APR 28 PH 2: 55

ECRETARY OF STATE

# FLORIDA LIMITED LIABILITY CO. JUNK & RECYCLING LLC

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

C. LEWIS

APR 2 9 2011

EXAMINER

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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:

# JUNK & RECYCLING LLC

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

#### ARTICLE II - Address:

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

## Principal Office Address:

Mailing Address:

3752 SUMMERWIND CIRCLE

3752 SUMMERWIND CIRCLE BRADENTON, FL 34209

BRADENTON, FL 34209

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

BASSAM MAJZOOB

Name

# 3752 SUMMERWIND CIRCLE

Florida street address (P.O. Box NOT acceptable)

BRADENTON

<sub>FI</sub> 34209

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stand 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..

(CONTINUED)

ed Agent's Signature (REQUIRED)

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<u>Title:</u> "MGR" = Manager "MGRM" = Managing Morob	or Managing Member(s):  Name and Address:		
MGRM	ASSAD R MAKLAD		
•	3752 SUMMERWIND CIRCLE BRADENTON, FL 34209		
MGRM	SAMAHER MAKLAD		
	3752 SUMMERWIND CIRCLE		
	BRADENTON, FL 34209		
MGRM	BASSAM MAJZOUB		
	3752 SUMMER WIND CIRCLE		
	BRADENTON, FL 34209		
(Use attachment if necessary)	than the date of filing: $04/25/2011$ (OPTIONAL)		
TLE V: Effective date, if other ffective date is listed, the date of filing.)	must be specific and cannot be more than five business days prior		
REQUIRED SIGNATURE:			

(In accordance with action 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

Filing Fees:

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

BASSAM MAJZOUB

5 5.00 Certificate of Status (Optional)