

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.

(((H11000201935 3)))



H110002019353ABCW

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

Tò:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FASTKIT CORP

Account Number : 1201,00000009

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

FLORIDA LIMITED LIABILITY CO. JIR C International, LLC

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

D. BRUCE

AUG 1 2 2011

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

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

8/11/2011

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY JIR C INTERNATIONAL, LLC

ARTICLE I - Name
The name of the Limited Liability Company is:

JIR C International, LLC

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Con

Principal Office Address: 15922 SW 63 Terrace Miami, FL 3393

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

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

Worldwide Corporate Administrators, LLC 2320 Ponce de Leon Blvd Coral Gables, FL 33134

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

Nicole Cunningham Registered Agent's Signature (REQUIRED)

(Continued)

EFFECTIVE DATE 8/11/1/

<u>Title:</u> Managing Member	Remon Oscar Carmona 15922 SW 63 Terrace Miami, FL 33193	
Managing Member	Ines Padron de Cormona 15922 SW 63 Terrace Miami, FL 33193	
Name and Address:		11 WG 11 SECRETARY
ARTICLE V: Effective date, if other than	the date of filing: August 11, 2011	OF STATE PEE, FLORIDA
REQUIRED SIGNATURE:	e de la companya de l	A PART I
Signature of a momber or a	n authorized representative of a member	

(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, I am aware the 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.)

Ramon Oscar Carmona		
Typed or printed name of signee		_

 $\lim_{t\to t}$