

Florida Department of State  
Division of Corporations  
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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  
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FEB 10 2012

L SELLERS

**\*\*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.**

**La Escuelita Bilingual School, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED

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Corporate Filing Menu

Help

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

**ARTICLE I:**

The name of the Limited Liability Company is:

**La Escuelita Bilingual School, LLC**

**ARTICLE II-ADDRESS:**

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

**4394 SW 145 Avenue  
Miami, FL 33175**

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

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

**Daniel Vila**

**Name**

**4394 SW 145 Avenue**

**Florida street address (P.O. Box not acceptable)**

**Miami, FL 33175**

**City, State, and Zip**

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.

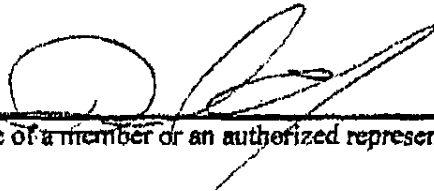


Registered Agent's Signature

**ARTICLE IV-Management (Check box if applicable)**

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

(An additional article must be added if an effective date is requested)



Signature of a member or an 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.).

Daniel Vila

Typed or printed name of signee

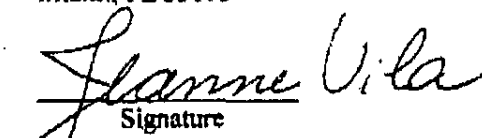
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**ARTICLE V -Member**

Daniel Vila  
4394 SW 145 Avenue  
Miami, FL 33175

  
Signature

Jeanne Vila  
4394 SW 145 Avenue  
Miami, FL 33175

  
Signature