

Florida Department of State  
Division of Corporations  
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.

((H12000038835 3)))



H120000388353ABC/

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

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORP  
Account Number : 120100000009  
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: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
trueSOURCE Packing, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

A. LUNT

FEB 14 2011

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

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

**ARTICLE I NAME**

The name of the Limited Liability Company is: **trueSOURCE Packing, LLC**

**ARTICLE II PRINCIPAL OFFICE ADDRESS**

The principal place of business/mailling address is:

Principal Address 31. W. Tarpon Avenue  
Tarpon Springs FL 34689

Mailing Address: 31. W. Tarpon Avenue  
Tarpon Springs FL 34689

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

The name and Florida Street address of the initial registered agent is: **Todd G. Unbehagen**  
31 W. Tarpon Avenue  
Tarpon Springs FL 34689

Having been named as registered agent and to accept service of process for the above stated corporation 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, FS.

  
Signature/Registered Agent

2/13/2012  
Date

**ARTICLE IV Managing Member(s)**

The name and address of the Managing Member(s) is as follows:

Aaron Derksen  
31 W. Tarpon Avenue  
Tarpon Springs FL 34689

Todd G. Unbehagen  
31 W. Tarpon Avenue  
Tarpon Springs FL 34689

**ARTICLE V EFFECTIVE DATE**

The effective date of this filing:

Immediately upon filing.

**Signature of managing 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.

  
Signature/Incorporator/Managing Mbr.

2/13/2012  
Date

Todd Unbehagen  
Printed name of Signer