

Florida Department of State
Division of Corporations
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To:

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

Effective Date 3-5-12

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 annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
El Ejemplar, LLC

Certificate of Status	0
Certified Copy	1
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5/2012

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

ARTICLE I NAME

The name of this Florida Limited Liability Company is:

El Ejemplar, LLC

ARTICLE II - ADDRESS

349 Meridian Avenue, Apt. B102
Miami Beach, Florida 33139

ARTICLE III - REGISTERED AGENT

Ivan Quijada
349 Meridian Avenue, Apt. B102
Miami Beach, Florida 33139

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Having been named registered agent and to accept service of process for the above stated limited liability company at the place I designated. I hereby accept the appointment as registered agent and agree to act in this capacity.

(X)

Signature

(V)

03/05/12

Date

ARTICLE IV - MANAGEMENT

The name and address of managing members or managers:

Ivan Quijada - Managing Member
349 Meridian Avenue, Apt. B102
Miami Beach, Florida 33139

Ciro Gamez - Member
349 Meridian Avenue, Apt. B102
Miami Beach, Florida 33139

Daniel Guzman - Member
349 Meridian Avenue, Apt. B102
Miami Beach, Florida 33139

ARTICLE V - COMPANY EXISTANCE

The effective date for this Limited Liability Company shall be:

March 5th, 2012

Signature 

Date 03/05/12

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TALLAHASSEE, FLORIDA

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