

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.

(((H12000109155 3)))



HI 20001091553ABCY

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 : I20100000009 Phone : (305)599-0839

Fax Number

1 (305)592-9591

APR 23 AM 8: 41

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. EL SAHABA, LLC

 Certificate of Status
 0

 Certified Copy
 1

 Page Count
 02

 Estimated Charge
 \$155.00

K.SALY EXAMINER APR 24 2012

RECEIVED 12 APR 23 PM 44 42 SECRETARY OF STATE VILAHASSEE, FLORID

Electronic Filing Menu

Corporate Filing Menu

Help

FILED! 12 APR 23 AM 8: 41' SEURE PARY OF STATE IALLAMASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is:

ELSAHABA, 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:

900 East Michigan Street Orlando, FL 32806 900 East Michigan Street Orlando, FL 32806

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

The name and the Florida street address the registered agent is:

BARRY N. BRUMER

Name

900 EAST MICHIGAN STREET

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

ORLANDO, FL 32806

City, State, and Zip

Having been named as registered agent 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 positions as registered agent as provided for in Chapter 608, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Manager and address of each Manager	aging Member(s): er or Managing Member is as follows:
Title: "MGR"= Manager "MGRM"= Managing Member	Name and Address:
MGRM	AZZA ELSHAL
	900 East Michigan Street Orlando, FL 32806
MGR	AL-SAHABA COMPANY
	12, 6th of October Street, Nahia, Boulk Al-DAKROUR, Giza Governorte. Egypt
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
(In accurdance with section 608.408(3), Fi	an authorized representative of a member. torida Statues, the execution of this document constitutes an a of perjury that the facis stated herein are true.)
BAY	RRY N. BRUMER
Typed	or printed name of signer