

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

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Account Name : FASTKIT CORP Account Number : I20100000009

: I20100000009 : (305)599-0839

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

FLORIDA LIMITED LIABILITY CO.
METAL GROUP, LLC

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

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Corporate Filing Menu

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K.SALY EXAMINER MAY 11 2012

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

5/10/2012

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compan	y is:
METAL GROUP, LLC	
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of t	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6598 NW 113TH PLACE	6598 NW 113TH PLACE
DORAL, FL 33178	DORAL, FL 33178
	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: CABANAS & ASSOCIATES, P.A. Name STREET, SUITE C-201
JOSEPH F. CABANAS - (CABANAS & ASSOCIATES, P.A.
	CABANAS & ASSOCIATES, P.A. Vame STDEET SUITE C 201
10520 NW 26TH S	STREET, SUITE C-201 篇字 写 5
Florida stre	et address (P.O. Box NOT acceptable)
DORAL	L 33172
Ci	ry, 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 (Required)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	JUANITA E. BEECH 6598 NW 113TH PLACE DORAL, FL 33178
·	
(Use attachment if necessary)	
ICLE V: Effective date, if other than a effective date is listed, the date must 90 days after the date of filing.)	the date of filing: (OPTIONAL) It be specific and cannot be more than five business days pro-
REQUIRED SIGNATURE:	
	Diden in

Signature of a member of 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 penaltics of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree falony as provided for in s.817.155, F.S.)

JUANITA E. BEECH

Typed or printed name of signee

Filing Pees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)