

Division of Corporations

L12000138023

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.

((H12000259723 3)))



H120002597233ABC+

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

OCT 30 2012

From:

Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

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.
L & S PROPERTIES OF NORTH FLORIDA, LLC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

RECEIVED
12 OCT 29 PM 4:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
12 OCT 29 PM 3:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

L & S PROPERTIES OF NORTH FLORIDA, LLC

ARTICLE II - ADDRESS:

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

332 Royal Lake Drive


Ponte Vedra Beach, FL 32082

ARTICLE III - REGISTERED AGENT NAME, OFFICE & SIGNATURE:

The name and Florida street address of the registered agent are

Scott Barry
332 Royal Lake Drive
Ponte Vedra Beach, FL 32082

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, Florida Statutes.



Registered Agent's Signature

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 OCT 29 PM 3:01

FILED

ARTICLE IV – MANAGER(S) OR MANAGING MEMBER(S):

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

Title:

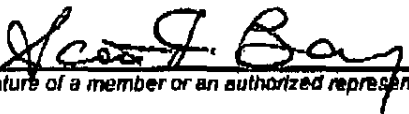
Name & Address:

Managing Member

Scott Barry
332 Royal Lake Drive
Ponte Vedra Beach, FL 32082

Managing Member

Lorraine Barry
332 Royal Lake Drive
Ponte Vedra Beach, FL 32082


Signature of a member or an authorized representative of a member.

Scott Barry

(In accordance with section 608.408(3), Florida Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)