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Division of Corporations

Fax Number : (850) 617-6383

L. SELLERS

From:

Account Name : FASTKIT CORP Account Number : 120100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

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## FLORIDA LIMITED LIABILITY CO.

Corazon Entertainment, LLC

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

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Corporate Filing Menu

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Corazon Entertainment, LLC		
(Must end with the words "Limited Liability Company, "L,		
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
12002 SW 128 <sup>th</sup> Caurt #208	12002 SW 128th Court #208	
Miami, FL 33186	Miami, FL 33186	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	d Office, & Registered Agent's Signature; tered Agent. You must designate an individual or another	
The name and the Florida street address of the Ignazio	registered agent are: Mazinni	
No	me	
12002 SW 128th Court #208		
Florida street address (P.	O, Box NOT acceptable)	
Miami, FL 33186		
City, Stat	c, and Zip	
Having been named as registered agent and to accept trability company at the place designated in this certiful agent and agree to act in this capacity. I further agree to the proper and complete performance of my duties, my position as registered agent as provided for in Cha	leate, I hereby accept the appointment as registered to comply with the provisions of all statutes relating and I am familiar with and accept the obligations of	
J Must	∆ Ass	
Kogisteted Agent's Si	gnature (REQUIRED)	

CT31 PM 1:1

Page 1 of 2

(CONTINUED)

<u>'itle:</u>	Name and Address:
MGR" = Manager	
MGRM" = Managing M	ember ·
MGR	Ignacio Mazzini
•	12002 SW 128th Court #208
	Miami, FL 33186
	,
	,
(Use attachment if n	ecessary)
DTICLE V. Effective	date, if other than the date of filing: 10/30/2012
•	(OPTIONAL)
he effective date: 1) cann	of be prior to nor more than 90 days after the date this document is file
tached Certificate of Con-	t of State; AND 2) must be the same as the effective date listed in the version, if an effective date listed therein.)
<u>EOUIRED</u> SIGNATU	ROE:
<u>EQUIRED SIGNATU</u>	ree:
<u>equired</u> signatu √)	RE:
<b>S</b>	of a member or an authorized representative of a member.
Signature of section 608, der the penulties of perjury the	of a member or an authorized representative of a member.  408(3), Plorida Statutes, the execution of this document constitutes an affirmation
Signature of section 608, der the penulties of perjury the	of a member or an authorized representative of a member.  408(3), Plorida Statutes, the execution of this document constitutes an affirmation at the facts stated herein are true. I am aware that any false information submitted in a