

L13000042042

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.

((H13000064407 3)))



H130000644073ABCZ

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 : I20100C00009
 Phone : (305) 539-0839
 Fax Number : (305) 532-9591

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 MAR 20 AM 7:56

****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. Polk Perio, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED
13 MAR 20 PM 4:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
MAR 21 2013
EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. NAME

The name of the limited liability company shall be:

Polk Perio, L.L.C.

ARTICLE II. ADDRESS

The principal place of business of this limited liability company shall be:

320 Avenue K SE, Suite 1, Winter Haven FL 33880

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE:

The name and address of the registered agent and office is Jeffrey D. Barnes, 710 County Walk Cove, Eagle Lake, FL 33839.

SIGNATURE *Jeffrey D Barnes*
TITLE Manager
DATE 3-14-13

Prepared by Ronald A. Brown & Associates, P.A.
P. O. Box 999, Winter Haven, FL 33882-0999

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 MAR 20 AM 7:56

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 MAR 20 AM 7:56

Having been named to accept service of process for the above-stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 607.325, Florida Statutes.

SIGNATURE Jeffrey D Barnes
DATE 3-14-13

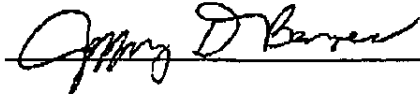
ARTICLE IV. MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company.

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

<u>Title:</u>	<u>Name and Address:</u>
<u>Manager</u>	<u>Jeffrey D. Barnes</u> <u>710 County Walk Cove</u> <u>Eagle Lake, FL 33839</u>

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
2013 MAR 20 AM 7:56



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

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

Jeffry D. Barnes

Typed or printed name of signee