

L13000121341
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.

((H13000190996 3)))



H130001909963ABC5

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 : (305) 592-9591

2013 AUG 27 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.
1401 SOUTH OCEAN LANE, LLC

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

RECEIVED
13 AUG 27 AM 6:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER
AUG 28 2013

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1401 SOUTH OCEAN LANE, LLC

ARTICLE II - Address

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

**7281 SIDONIA COURT
BOCA RATON, FL 33433**

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

The name and the Florida street address of the registered agent are:

ANTHONY AQUINO

Name

7281 SIDONIA COURT

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

BOCA RATON, FL 33433

City, 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.

x. 


Registered Agent's Signature

FILED
2013 AUG 27 - AM 9:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

X 
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 penalties of perjury that the facts stated herein are true.)

ANTHONY AQUINO

Typed or printed name of signer

Article V - Members of the Limited Liability Company:
There will be TWO member of this Limited Liability Company.

ANTHONY AQUINO - 50%
BERTA CASTELLANO - 50%

2013 AUG 27 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED