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.

Electronic Filing Cover Sheet

(((H14000075362 3)))



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

: (305)599-0839

Fax Number

: (305)592-9591

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

Address:					
	Address:	Address:	Address:	Address:	Address:

FLORIDA LIMITED LIABILITY CO.

J.L.B. PAINTING SERVICES, LLC

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

APR - 1 2014

T CLINE

3/28/2014 4:23 PM



March 31, 2014

FLORIDA DEPARTMENT OF STATE Division of Corporations

FASTKIT CORP

SUBJECT: J.L.B. PAINTING SERVICES, LLC

REF: W14000020052

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Limited liability companies are either member-managed or manager-managed not both. Member-managed companies are managed by the members of the company is manager-managed companies are managed by non-members. Please amend your document to reflect either the limited liability company is member-managed or manager-managed. If the limited liability company is member-managed, list the names and addresses of the members who will manage the company and identify them solely as managing on members. If the limited liability company is manager-managed, list the frames and addresses of the non-members who will manage the company and identify them solely as managers. You cannot list both managers and managing members.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II FAX Aud. #: H14000075362 Letter Number: 914A00006751

RECEIVED
14 HAR 31 PH 4: 14
ALTHROUGH

ARTLICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE !- Name:

The name of the Limited Liability Company is:

J.L.B. PAINTING SERVICES, LLC

Article II-Address:

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

Principal Office Adress:

Mailing Address:

12990 SW 63^{AD} TER, UNIT 607, MIAMI, FL 33183

SAME

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Floridaregistration).

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

LILIAN HARDY, 12990 SW 63RD TER. UNIT 607. MIAMI, FL 33183.

Having been named as registered agent and to accept services 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 statues 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 60.5 F. S.

Registered agent's Signature (Required)

(continue)

The name and address of each	n Manager or managing Member is as follow:
TITLE:	Name and Address
MGRM	LILIAN HARDY
	12990 SW 63 RD TER. UNIT 607.
	MIAMI, FL 33183.
MGRM	JUAN JOSE CHAMORRO
	12990 SW 63 RD TER. UNIT 607
•	MIAMI, FL 33183. MIAMI, FL 33183. MIAMI, FL 33183.
2014.(The effective date:1) document is filed by the Flor	te, if other than the date of filling, MARCH 24TH, and cannot be prior to not more than 90 days after that rida Department if State; AND 2) must be the same as the ttached Certificate of Conversion, if an effective date is
REQUIRED SIGNATURE:	new X
SIGNATURE OF THE MEMB	ER OR AN AUTHORIZED REPRESE <mark>NTATIVE</mark> DE A MEMBER.
	605. 0203 Florida Statutes, the execution of this document nder the penalties of perjury that that the facts stated

Type or printer name of signee.