

**L14000082497**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

Effective Date

5/15/14

From:

Account Name : FASTKIT CORP

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Phone : (305) 599-0839

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14 MAY 21 AM 9:58

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TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.  
ANGEL DOMINGUEZ, LLC**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 MAY 21 AM 7:50

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MAY 22 2013

T. HAMPTON



May 21, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FASTKIT CORP

SUBJECT: ANGEL DOMINGUEZ, LLC  
REF: W14000031868

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

List the name of the Manager.

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.

Tammy Hampton  
Regulatory Specialist III

FAX Aud. #: H14000119539  
Letter Number: 014A00010935

RECEIVED  
14 MAY 21 AM 9:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Effective Date

5/15/14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ANGEL DOMINGUEZ, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

702 EAST 19 STREET

702 EAST 19 STREET

HALEAH, FL 33013

HALEAH, FL 33013

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 Florida registration.)

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

SILVIO CASTILLO

Name

8866 SW 131 CT

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

MIAMI

FL 33183

City

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 603, F.S.

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

ANGEL DOMINGUEZ

702 EAST 19 STREET

HIALEAH, FL 33013

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 05/15/2014 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE**



Signature of a member or an authorized representative of a member.  
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.133, F.S.)

Angel Dominguez

Typed or printed name of signer

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