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To:

Division of Corporations
Fax Number : (850) 617-6383

EFFECTIVE DATE 06-06-14

From:

Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

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**FLORIDA LIMITED LIABILITY CO.
MAX UNLIMITED LLC**

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TALLAHASSEE, FLORIDA**

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B. BOSTICK

JUN 10 2014

EXAMINER

6/9/2014 3:08 PM

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

ARTICLE I NAME

The name of this Florida Limited Liability Company is:

MAX UNLIMITED LLC

ARTICLE II - ADDRESS

300 ARAGON AVENUE, SUITE 303
CORAL GABLES, FLORIDA 33134

ARTICLE III - REGISTERED AGENT

MARY E. PRADOS, CPA PA
8740 N.E. 2ND AVENUE
EL PORTAL, FLORIDA 33138

Having been named registered agent and to accept service of process for the above
stated limited liability company at the place I designated. I hereby accept the
appointment as registered agent and agree to act in this capacity.



Signature

6/6/14

Date

ARTICLE IV - MANAGEMENT

The name and address of managing members or managers:

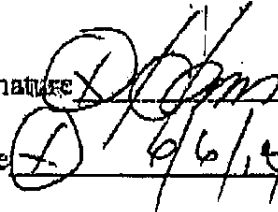
JACOB HOEKSTRA - MANAGING MEMBER
300 ARAGON AVENUE, SUITE 303
CORAL GABLES, FLORIDA 33134

CRISTINA SPAGNA - MANAGING MEMBER
300 ARAGON AVENUE, SUITE 303
CORAL GABLES, FLORIDA 33134

ARTICLE V - COMPANY EXISTENCE

The effective date for this Limited Liability Company shall be:

June 6, 2014

Signature 

Date 