

L14000192549

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.

(((H14000291446 3)))



H140002914463ABC+

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

****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.
FAMILY MATTERS REFERRAL SERVICE, LLC**

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

RECEIVED

14 DEC 17 AM 10:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 DEC 17 PM 3:17

FILED

DEC 18 2014

S. YOUNG

ARTICLES OF ORGANIZATION
OF
FAMILY MATTERS REFERRAL SERVICE, LLC

The undersigned hereby execute these Articles for the purpose of forming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. The undersigned further declares that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company (the "Company").

ARTICLE I: NAME

The name of the Company shall be **FAMILY MATTERS REFERRAL SERVICE, LLC**.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the Limited Liability Company shall be 1800 NE 171 Street, North Miami Beach, FL 33162.

ARTICLE III: PURPOSE OF LIMITED LIABILITY COMPANY

This Limited Liability Company may engage or transact in any or all lawful activities or business permitted under Laws of the United States, the State of Florida, or any other state, country, territory or nation.


FILED
14 DEC 17 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Mark Shaikhan
1800 NE 171 Street
North Miami Beach, FL 33162

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 605 F.S.



Registered Agent's Signature

ARTICLE V: Manager(s) or Managing Member(s):


The names and addresses of managing members/managers are:

(MGRM)
Mark Shaikhan
1800 NE 171 Street
North Miami Beach, FL 33162

(MGRM)
Nina Borik
1800 NE 171 Street
North Miami Beach, FL 33162

The undersigned, being the original member of the Company, hereby certifies that the foregoing constitutes the Articles of FAMILY MATTERS REFERRAL SERVICE, LLC.

Executed by the undersigned on December 17, 2014.



Signature of a member of an authorized representative of a member

FILED
14 DEC 17 11:31
SECRET
FALLAH