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.

(((H150000384363)))



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. MICHELLE S. AKINS, BSW CONSULTING LLG

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

FEB 1 6 2015

T. HAMPTON

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - NAME:

The name of the Limited Liability Company is:

MICHELLE S. AKINS, BSW CONSULTING LLC

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

ARTICLE 11 - Address:

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

Principal Office Address:
2967 NE 52nd Drive
Okeechobee, FL 34972

Mailing Address: 2967 NE 52rd Drive Okeechobee, FL 34972

ARTICLE 111 - 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 FL registration.)

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

Michelle S Akins 2967 NE 52nd Drive Okeechobee, FL 34972

Having been named as registered agent and to accept service of process for the above state limited liability company at the place designated in this certification, 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

Page 1 of 2

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

Managing Member

Michelle S. Akins 2967 NE 52nd Drive Okeechobee, FL 34972

ARTICLE V - Effective date, if other than the date of filing: February 13, 2015 (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.)

Required Signature:

Signature of a member or an authorized representative of a member

(In accordance with section 605) Florida Statues, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Michelle S. Akins

typed or printed name of signee

Page 2 of 2

15 FEB 13 AM 8: 13
SEURETARY OF STATE