

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.

((H15000087949 3)))



H150000879493ABCA

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 APR -9 AM 11:58

FILED

****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.
8325 SUNRISE LAKES BLVD 108 LLC**

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

15 APR -9 PM 10:00

BUREAU OF CORPORATIONS
INFORMATION SERVICES

K. SALLY
EXAMINER
APR 10 2015

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE - Name:

The name of the limited liability company is:

8325 SUNRISE LAKES BLVD 108 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:

8325 SUNRISE LAKES BLVD #108

SUNRISE, FL 33322

Mailing Address:

8325 SUNRISE LAKES BLVD #108

SUNRISE, FL 33322

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:

JOSE E. PEREZ

8110 SUNRISE LAKES BLVD. APT. 302

SUNRISE, FL 33322

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 obligation of my position as registered

REGISTER AGENT SIGNATURE REQUIRED



A handwritten signature, appearing to be 'JEP', is written over a horizontal line.

FILED
2015 APR -9 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2015 APR -9 AM 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV -

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

Title:

Name and Address:

"AMB" = Authorized Member

"MGR" = Manager

MGR

JOSE E. PEREZ

8120 SUNRISE LAKES BLVD., APT. 302

SUNRISE, FL 33322

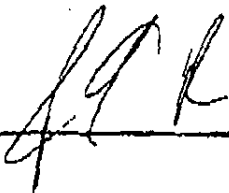
AMB

Article V: Effective date, if other than the date of filing:
(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.

MEMBER REQUIRED SIGNATURE



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0209 (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.817.155, F.S.)