

**L15000170589**

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.

(((H15000170589 3)))



H150001705893ABC3

**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) 617-6381

**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.  
KEY MARGO VENTURES, LLC**

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

RECEIVED  
15 JUL 13 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
15 JUL 13 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I**

The name of the Limited Liability Company is:

KEY MARGO VENTURES, LLC

**ARTICLE II**

The principal place of business and mailing address of the Limited Liability Company is:

152 HARBOURSIDE CIRCLE  
JUPITER, FL 33477

**ARTICLE III**

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

LAWRENCE J. SIGNORI  
152 HARBOURSIDE CIRCLE  
JUPITER, FL 33477

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 IV**

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

MGRM

LAWRENCE J. SIGNORI  
152 HARBOURSIDE CIRCLE  
JUPITER, FL 33477

(CONTINUED)  
Page 1 of 2

**FILED**  
15 JUL 13 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES V

The effective date of this Limited Liability Company is July 10, 2015

SIGNATURE:

  
\_\_\_\_\_  
LAWRENCE J. SIGNORI, MGRM

(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.817.155, F.S.)

FILED  
15 JUL 13 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA