Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : AGENTS AND CORPORATIONS, INC WOTH THE

Account Number: I20010000112

Phone

: (302)575-0875

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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.

786Locksmith LLC

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February 8, 2016

FLORIDA DEPARTMENT OF STATE

Division of Corporations

AGENTS AND CORPORATIONS, INC

SUBJECT: 786LOCKSMITH LLC

REF: W16000009579

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

If you have any further questions concerning your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section FAX Aud. #: H16000031035 Letter Number: 016A00002638

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

786Locksmith LLC

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

ARTICLE 11 - Address:

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

Principal Office Address:

Mailing Address:

18505 SW 104 AVE, UNIT 5 MIAMI, FL 33157

18505 SW 104 AVE, UNIT 5 MIAMI, FL 33157

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:

AGENTS AND CORPORATIONS, INC.

Name

300 FIFTH AVENUE SOUTH SUITE 101-330

Florida street address (P.O. Box NOT acceptable)

NAPLES

FI.

34012

City

Zip.

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..

Agents and Corporations, Inc.

Registered Agent's Signature (Required)

John L. Williams, President

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized tomanage undcontrol the Limited Liability Company:

Title:

Nameand Address:

"AMBR"= AuthorizedMember

'MGR"= Manager

MARZENA BEDNARSKA

MGR

18505 6W lowave units

Miami FL 33157

(Use attachment if necessary)

AR FIGLE V: Effective date if other than the date of filling:

(OPTIONAL)

(If an effective dateis listed,thedatemustbespecificand cannotbernorethan fivebusiness days priortoor90days after the date of filing.)

Deshurlo

ARTICLE VI.Otherprovisions, If any.

REQUIREDSIGNATURE:

Signature of amember or an authorized representative of amember.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation underthepenalties of perjury that the facts stated herein are true lant aware that any false information submitted in a document to the Department of State

MARZENA BEDNARSKA
Typed or printed name of signee

FilingFees:

\$125.00 Filing Fee for Articles of Organization and DesignationofRegistered Agent

constitutes a third degree felony as provided for in \$.817.155, F.S.)

5 30.00 Certified Cupy (Optional)

\$ 5.00 Certificate of Status (Optional)

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