

L16000055966

https://www.flsos.org/ept/7000r.exe

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.

(((H16000071470 3)))



H160000714703ABC

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) 399-0839  
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: \_\_\_\_\_

RECEIVED

16 MAR 21 PM 4:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.  
NSD PROPERTIES, LLC

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

TLH

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

16 MAR 21 PM 2:06

FILED

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**NSD PROPERTIES, LLC**

**ARTICLE II - Address:**

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

**200 SW 61<sup>ST</sup> AVE  
MIAMI, FL 33144**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

**NEHYBA DICKINSON  
200 SW 61<sup>ST</sup> AVE  
MIAMI, FL 33144**

*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

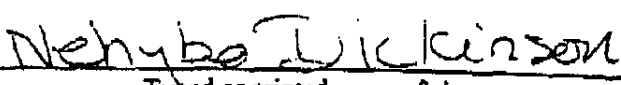
**ARTICLE IV - Management (Check box if applicable.)**

- ☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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

(In accordance with section 605.0203 Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

  
\_\_\_\_\_  
Typed or printed name of signee

16 MAR 21 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**ARTICLE V - Member(s) & Managing Member(s)**

The name(s) and address(s) of the initial member(s) of the Company is/are:

<u>NAME</u>	<u>ADDRESS</u>	<u>TITLE</u>
Nehyba Dickinson	200 SW 61 <sup>st</sup> Ave MIAMI, FL 33144	Managing Member
Maria Granadillo	200 SW 61ST Ave MIAMI, FL 33144	Managing Member

IN WITNESS WHEREOF, the undersigned member(s) has/have made and  
subscribed these Articles of Organization at **LESTER BARRERAS, C.P.A., P.A. 1987**  
**N.W. 88 CT., STE. 201 MIAMI, FL 33172** for the foregoing uses and purposes this

09 day of March, 20 16.

  
\_\_\_\_\_  
MANAGER MEMBER

16 MAR 21 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED