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Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305)599-0839
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16 APR 27 PM 4:04

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDAFLORIDA LIMITED LIABILITY CO.
BLUE CHAIN GROUP, LLC

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

FILED
16 APR 27 PM 6:04
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BLUE CHAIN GROUP, LLC

ARTICLE II - Address:

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

**11200 NW 187TH ST, STE 6 APT BAY 2
MIAMI, FL 33178**

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

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

**HORACIO ROSITO
16485 COLLINS AVE APT#638
SUNNY ISLES, FL 33160**

Having been named as registered agent and to accept service of process for the above stated limited liability company in 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.

[Signature]
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]
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.)

Horacio Rosito

Typed or printed name of signer

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

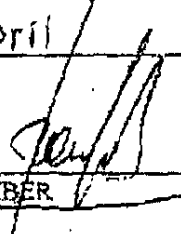
The name(s) and address(s) of the initial member(s) of the Company is/are:

<u>NAME</u>	<u>ADDRESS</u>	<u>TITLE</u>
HORACIO ROSITO	16485 COLLINS AVE APT #638 SUNNY ISLES, FL 33160	MANAGING MEMBER
JUAN DIEGO ESTRADA	155 OCEAN LANE DR APT #811 KEY BISCAYNE, FL 33149	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

27th day of April, 2016.



MANAGER MEMBER