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.

(((H16000135622 3)))



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

Fax Number

: (305)599-0839 : (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. Brenda's Alterations, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

ARTICLES OF ORIGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:

Brenda's Alterations, LLC

PRINCIPAL AND MAILING OFFICE ADDRESS **ARTICLE II**

The principal place of business/mailing address is:

4524 Bartlet Road Holiday, FL 34690

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

The name and Florida Street address of the initial registered agent is:

Brends L. Gelinas 4524 Bartlet Road Holiday, FL 34690

Having been named as registered agent and to secret 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 duting, and I am familian with and accept the obligations of my position as registered agent as provided for in Chapter 805 F.S.

ARTICLE IV Manager(s)

The name, title and address of such person authorized to manage and control the Limited Liability Company:

Brenda L. Gelinas - Mnnager 4524 Barriet Road

Holiday, FL 34690

ARTICLE V EFFECTIVE DATE

The effective date of this filing:

Immediately upon filing

Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the panalties of perjury that the facts stated herein are true. I am aware that any faise information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)