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**FLORIDA LIMITED LIABILITY CO.
MILLICENT HOSPITALITY MANAGEMENT, LLC**

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|-----------------------|----------|
| Certificate of Status | 0 |
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 SEP 13 AM 9:00

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9/14/16

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

MILLCENT HOSPITALITY MANAGEMENT, LLC.

Article I

The name of the Limited Liability Company is:

MILLCENT HOSPITALITY MANAGEMENT, LLC.

Article II

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

Mailing Address: 5007 N. Hiatus Rd.,
Sunrise, FL 33351

Street Address 5007 N. Hiatus Rd.,
Sunrise, FL 33351

Article III

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State or on another effective date as specified. The company's existence shall be perpetual unless the company is dissolved earlier as provided in these articles of organization or in the regulations.

Article IV

The Limited Liability Company shall be managed by the members in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The names and addresses of the managing members of the company are:

| <u>Manager(s)</u> | <u>Address</u> |
|-------------------|--|
| Christina Moore | 5007 N. Hiatus Rd., Sunrise, FL 33351 |
| Ansilla James | 5007 N. Hiatus Rd., Sunrise, FL 33351 |

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TALLAHASSEE, FLORIDA

Article V

The Limited Liability Company is organized by the following initial member(s), whose name and address is/are as follows:

| <u>Member(s)</u> | <u>Address</u> |
|------------------|--|
| Christina Moore | 5007 N. Hiatus Rd., Sunrise, FL 33351 |
| Ansilla James | 5007 N. Hiatus Rd., Sunrise, FL 33351 |

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TALLAHASSEE, FLORIDA

Additional members may be admitted by the unanimous written consent of all members under the terms and conditions agreed to by all of the members.

Article VI

The undersigned member or authorized representative of a member of **MILLICENT HOSPITALITY MANAGEMENT, LLC.**, certifies:

1. the above named limited liability company has at least one member;
2. Each member shall make additional capital contributions to the company only on the unanimous consent of all the members.
3. No additional members shall be admitted to the company except by the unanimous written consent of all the members of the company and on such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the company as set forth in the operating agreement of the company.
4. The company shall be dissolved on the death, bankruptcy, or dissolution of a member or Chief Executive Chief Executive Manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, as set forth in the operating.

(In accordance with Section 605, Florida Statutes, the execution of these articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

By:


Christina Moore

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0203 FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATED A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company:

MILLICENT HOSPITALITY MANAGEMENT, LLC.

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

**Christina Moore
5007 N. Hiatus Rd.,
Sunrise, FL 33351**

Having been named 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 provision 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.

By: *Christina H. Moore*
Christina Moore

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

Ss:

COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority, this 12th day of Sept., 2016 personally appeared Christina Moore to me well known to be the persons who executed the above and foregoing Articles of Organization of MILLICENT HOSPITALITY MANAGEMENT, LLC., who state that he executed the same for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this 12th day of September 2016

My Commission Expires:

By: *[Signature]*
Notary Public



ROBERT L. MELLINGER
MY COMMISSION # FF 050822
EXPIRES: September 10, 2017
Banded Thru Budget Notary Services

STATE OF FLORIDA

Ss:

COUNTY OF MIAMI- DADE

BEFORE ME, the undersigned authority, this 12th day of Sept., 2016 personally appeared, **Christina Moore** to me well known to be the persons who executed the above and foregoing Articles of Organization of **MILLICENT HOSPITALITY MANAGEMENT, LLC**, and who state that he executed the same for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this 12th day of September 2016.

My Commission Expires:



ROBERT L. MELLINGER
MY COMMISSION # FF 050822
EXPIRES: September 18, 2017
Bonded Through Bright Notary Services

By: _____

[Handwritten Signature]
Notary Public

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TALLAHASSEE, FLORIDA