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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
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Phone : (305) 599-0839
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Email Address: _____

FLORIDA LIMITED LIABILITY CO.

Tamera Sue McInerney, PLLC

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

17 MAY 30 PM 4:05

STATE
OF FLORIDA
DIVISION OF CORPORATIONS
RECORDATION SERVICESSECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 MAY 30 AM 8:12

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ARTICLES OF ORIGATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is: **Tamera Sue McInerney, PLLC**

ARTICLE II PRINCIPAL AND MAILING OFFICE ADDRESS

The principal place of business/mailling address is:

1113 2nd Avenue NW
Largo FL 33770

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

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

Tamera Sue McInerney
1113 2nd Avenue NW
Largo FL 33770

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.

Tamera S. McInerney
Registered Agent

4/27/17
Date

ARTICLE IV Manager(s)

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

Tamera Sue McInerney - Manager
1113 2nd Avenue NW
Largo FL 33770

ARTICLE V EFFECTIVE DATE

The effective date of this filing:

Immediately upon filing.

ARTICLE VI PURPOSE

The purpose of the business is:

Real Estate Agent

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 penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.135, F.S.)

Tamera S. McInerney
Signature of Incorporator/Member

Tamera S. McInerney
Printed name of Signer

4/27/17
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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