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Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : FASTKIT CORP
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA LIMITED LIABILITY CO.
Happenings by Kambria, LLC

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

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

ARTICLE I NAME

The name of the Limited Liability Company is: **Happenings by Kambria, LLC**

ARTICLE II PHYSICAL AND MAILING OFFICE ADDRESS

The physical place of business and mailing address is:

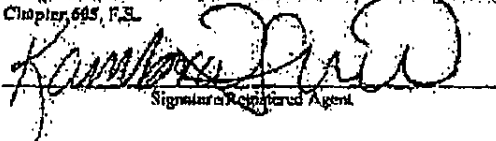
Physical Address:
109 West Hanna Avenue
Tampa, FL 33604

Mailing Address:
109 West Hanna Avenue
Tampa, FL 33604

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

The name and Florida Street address of the initial registered agent is: **Kambria Sims**
109 West Hanna Avenue
Tampa, FL 33604

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 685, F.S.


Signature of Registered Agent

10/12/2017
Date

ARTICLE IV Manager(s)

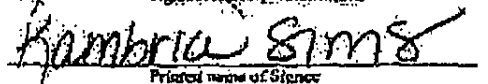
The name, title and address of each person authorized to manage and control the Limited Liability Company:
Kambria Sims - MGR
109 West Hanna Avenue
Tampa, FL 33604

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 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.)


Signature of Member or MGR

Printed name of Signer

10/12/2017
Date