

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.

((H18000064051 3)))



H180000640513ABCZ

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
Phone : (305) 599-0839
Fax Number : (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.
2969 FABLE STREET LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

FEB 27 2018

K Brumbley

ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
2018 FEB 26 AM 11:03
STATE OF FLORIDA
TALLAHASSEE

ARTICLE I: Name

The name of the Limited Liability Company is:

2969 FABLE STREET LLC

ARTICLE II: Address:

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

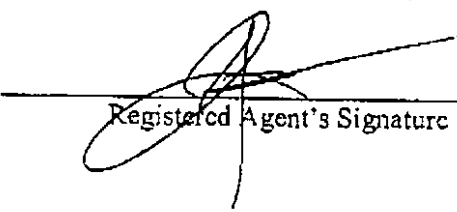
1607 PONCE DE LEON BLVD., SUITE 205
CORAL GABLES, FL 33134

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

JOSE A TORRES

10305 NW 41ST STREET, SUITE 116
DORAL, FL 33178

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 provided for in Chapter 605 F.S.



Registered Agent's Signature

PREPARED BY:
JN ACCOUNTING AND TAX SERVICE, INC.
10305 N.W. 41ST STREET, SUITE 116
DORAL, FL 33178

ARTICLE IV: Management

The name and address of the persons authorized to manage and control the Limited Liability Company, 2969 FABLE STREET LLC are:

Title: AMBR

Bryce Country Corporation – 1607 Ponce De Leon Blvd., Suite 205
Coral Gables FL 33134

Title: MGR

Juan R Toselli – 1607 Ponce De Leon Blvd., Suite 205, Coral Gables FL 33134

Title: MGR

Silvia S Suarez – 1607 Ponce De Leon Blvd., Suite 205, Coral Gables FL 33134

Title: MGR

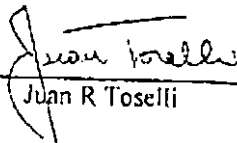
Juan C Toselli – 1607 Ponce De Leon Blvd., Suite 205, Coral Gables FL 33134

ARTICLE V: Amendment of Article of Organization

The company reserves the right to amend, alter, change, or repeal any provisions contained in these articles of organizations in the manner now or hereafter prescribed by statute and all rights conferred upon Members herein are granted subject to this reservation.

Effective Date: February 26, 2018

Signature of member or an authorized representative of a member:



Juan R Toselli

I am the member or authorized representative of a member submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.