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Florida Department of State
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To:
Division of Corporations
Fax Number : (850) 617-6381

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Account Name : FASTKIT CORP
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Phone : (305) 599-0839
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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.
Thomas McAuliffe, PLLC

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

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2018 MAR 27 PM 4:08
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TALLAHASSEE, FLORIDA
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ARTICLES OF ORIGATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is: **Thomas McAuliffe, PLLC**

ARTICLE II PRINCIPAL AND MAILING OFFICE ADDRESS

The principal place of business/mailling address is:

16601 Valley Drive
Tampa FL 33618

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

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

Thomas McAuliffe
16601 Valley Drive
Tampa FL 33618

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.

Thomas McAuliffe
Signature/Registered Agent

3-27-18
Date

ARTICLE IV Manager(s)

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

Thomas McAuliffe - Manager
16601 Valley Drive
Tampa FL 33618

ARTICLE V EFFECTIVE DATE

The effective date of this filing:

Immediately upon filing.

ARTICLE VII BUSINESS PURPOSE

Real Estate Agent Sales

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.817.155, F.S.)

Thomas McAuliffe
Signature/Incorporator/MGR.

3-27-18
Date

Thomas McAuliffe
Printed name of Signee

18 MAR 12 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA