

# US000108748

## 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.

((H18000141077 3)))



H180001410773ABC\$

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 : I2010C000009  
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: \_\_\_\_\_

RECEIVED

2018 MAY -4 PM 4:17

FLORIDA DEPARTMENT OF  
CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

### FLORIDA LIMITED LIABILITY CO. GMAR CATERING FOOD, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

J. FASON

MAY 07 2018

18 MAY -4 AM 9:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

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

**ARTICLE I**

The name of the Limited Liability Company is:  
GMAR CATERING FOOD, LLC.

**ARTICLE II**

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

**PRINCIPAL OFFICE ADDRESS:**

10838 SW 228 TERRACE  
CUTLER BAY, FL 33170

**MAILING ADDRESS:**

10838 SW 228 TERRACE  
CUTLER BAY, FL 33170

**ARTICLE III**

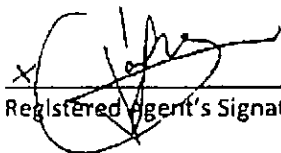
The purpose for which this Limited Liability Company is organized is:  
CATERING FOOD SERVICES.

**ARTICLE IV**

The name and Florida street address of the Registered Agent is:

JOSE L. LOPEZ  
10838 SW 228 TERRACE  
CUTLER BAY, FL 33170

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.



Registered Agent's Signature (REQUIRED)

APPROVED  
AND  
FILED  
18 MAY -4 AM 9:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE V**

The name and address of managing members/managers are:

**TITLE: MGRM**

JOSE L. LOPEZ

10838 SW 228 TERRACE

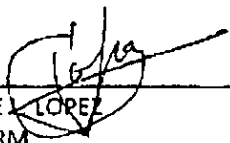
CUTLER BAY, FL 33170

**ARTICLE VI**

The effective date for this Limited Liability Company shall be:

MAY 4, 2018

Signature of member or an authorized representative of a member:

X   
\_\_\_\_\_  
JOSE L. LOPEZ  
MGRM