## division or Corporations

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.

(((H18000286628 3)))



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 : FASTRIT CORP Account Number : 120100000009 Phone : (305)599-0939 Fax Number : (305)592-9591

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one small address please.\*\*

Email Address:\_

## FLORIDA LIMITED LIABILITY CO. Calvin Pringles, PLLC

0
1
01
\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF ORIGINATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME	
The name of the Limited Liability Company is: Calvin Pr	ringles, PLLC
ARTICLE II PRINCIPAL AND MAILING OFFICE ADDR The principal place of business/mailing address is:	IESS 3321 Haviland Court #203 Pelm Harbor FL 34684
ARTICLE III Registored Agent, Registered Office & Registor	red Agont'a Signature:
The name and Florida Street address of the initial registered agent is:	Calvin Pringles 3321 Haviland Court #203 Palm Harbor FL 34684
Having been named as registered agent and to necept acride of process for the abethe place designated in this certificate, I hereby accept the appointment as register capacity. I further agree to comply with the provisions of all sintuites relating to the of my duties, and I am familiar with and accept the obligations of my position as reChapter 605, F.S	en alless bug litter to lit i lipp
Signature/Registered Agent	10/02/18 Date
ARTICLE IV Manager(s) The name, title and address of each person authorized to manage and co	ontrol the Limited Liability Company; Calvin Pringles - Manager 3321 Haviland Court #203 Palm Harbor FL 34684
ARTICLE V EFFECTIVE DATE The offective date of this filing:	Upon receipt
ARTICLE VI BUSINESS PURPOSE The business purpose of this business is:	Real Estate Sales
Signature of a member or an authorized representative of a mem Florida Statutes, the execution of this document constitutes an affirmat herein are true. I am aware that any falso information submitted in a doc constitutes a third degree felony as provided for in x817.155, F.S.)	aber. (In accordance with section 605,0203 (I) (b), ion under the penalties of perjury that the facts stated cument to the Department of State
Signature/incorporator/MQR.  Calvin Distance  Printed name of Signate	10/02/18; - 2 F