DIVISION OF Corporat	ons	Page 1 of 1
L	Jorida Department of State Division of Conformations Rectron Filling Sover Such	1232
Note	Please print this page and use it as a cover sheet. Type the fax audit number (she below) on the top and bottom of all pages of the document.	own
	(((H18000314934 3)))	
	H160003149343ABC0	
Note:	DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doin will generate another cover sheet.	g so
	To: Division of Corporations Fax Number : (050)617-6381 From Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591	
E	the email address for this business entity to be used for fut nnual report mailings. Enter only one email address please.**	πτφ
2018 OCT 31 PH 3: 31	FLORIDA LIMITED LIABILITY CO. FIRST CHOICE REFERRAL SERVICE, LLC Certificate of Status 0 Certified Copy 1 Page Count 02 Estimated Charge \$155.00	FILED 2018 OCT 31 AH 9: 16 SECRETARY CHI JINE IMLANASCEL FLORED
Electro	onic Filing Menu Corporate Filing Menu Help	
		NOV 0.1.2018 K. Brumbley

.

ARTICLES OF ORGANIZATION

ယ်

AH 9:

[ť]

ж

OF

FIRST CHOICE REFERRAL SERVICE, LLC

The undersigned bereby execute these Articles for the purpose of forming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. The undersigned further declares that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company (the "Company").

ARTICLE J: NAME

The name of the Company shall be FIRST CHOICE REFERRAL SERVICE, LLC.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the Limited Liability Company shall be 6846 Palmetto Circle S. Ste 1117, Boca Raton, FL 33433.

ARTICLE III: PURPOSE OF LIMITED LIABILITY COMPANY

This Limited Liability Company may engage or transact in any or all lawful activities or business permitted under Laws of the United States, the State of Florida, or any other state, country, jerritory or nation.

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and the Florida street address of the registered agent is:

Mark Shaikhan 6846 Palmetto Circle S, Ste 1117 Boca Raton, FL 33433

Having been named as registered agent and to accept service of process for the above stated limited lability 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.

Ken Registered Agent's Signature

ARTICLE V: Manager(s) or Managing Member(s):

The name and address of managing member/manager is:

(MGRM) Mark Shaikhan 6846 Palmetto Circle S, Ste 1117 Boca Raton, FL 33433

The undersigned, being the original member of the Company, hereby certifies that the foregoing constitutes the Articles of FIRST CHOICE REFERRAL SERVICE, LLC.

Executed by the undersigned on October 31, 2018.

Signature of a member of an authorized representative of a member