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 L19000215927
 Division of Corporations

Florida Department of State
 Division of Corporations
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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.
 G & N YARD HOLDINGS LLC**

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

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 SECRETARY OF STATE
 TALLAHASSEE, FL

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J. FASON

SEP 03 2019

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

G & N YARD HOLDINGS LLC.

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:9804 NW 80 AVENUE
HIALEAH GARDENS, FL 33016Mailing Address:9804 NW 80 AVENUE
HIALEAH GARDENS, FL 33016

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JENIFFER RUIZ

Name

9804 NW 80 AVENUEFlorida street address (P.O. Box NOT acceptable)HIALEAH GARDENS FL 33016

City

State

Zip

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)

(CONTINUED)

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TALLAHASSEE, FL

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

OPERATING MGR:

MEMBER

Name and Address:

JENIFFER RUIZ

9804 NW 80 AVENUE

HIALEAH GARDENS, FL 33016

DAMIAN D. LOPEZ

9804 NW 80 AVENUE

HIALEAH GARDENS, FL 33016

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 8/29/19 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

JENIFFER RUIZ

Typed or printed name of signer

FAX

From: stephen@kimmarkscpa.com

To:

The following files are attached to this email.
2019.08.30 Amendment

Best Regards,

Stephen Korn, C.P.A.

Kim Marks, C.P.A. P.A.
305.895.5815 Office
754.214.5532 Cell
305-895-6273 Fax

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