Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Account Name : FASTKIT CORP Account Number : I20100000009 : (305)599-0839

Fax Number : (305)592-9591

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Email	Address:			

FLORIDA LIMITED LIABILITY CO. **FUNDING EXPRESS, LLC**

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FUNDING EXPRESS, 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:

1395 BRICKELL AVENUE, SUITE 800 MIAMI, FLORIDA 33131

Mailing Address:

1395 BRICKELL AVENUE, SUITE 800 MIAMI, FLORIDA 33131

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:		(8)
STEVE BURTON		0.50
Name	<u>(</u>	-,
1395 BRICKELL AVENUE, SLIJTE 800	- 1,	
Florida street address (P.O. Box NOT acceptable)		ව
MIAMI, FLORIDA 33131	ξ -	

City, State and 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 695, P.Sc. Special provisions.

Mr. Struc Burton

Registered Agent's Signature (REQUIRED)

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

Name, address and title:

STEVE BURTON , MIGR 1395 BRICKELL AVENUE, SUITE 800 MIAMI, FLORIDA 33131

(If an office the state to the state of	than the date of filing: 12/18/2019 .(C	PTIONAL)
days after the date of filing.)	rte must be specific and cannot be more than five business	days prior to or 9
Note: If the date inserted in this bl not be listed as the document's effi	ock does not meet the applicable statutory filing requirement ective date on the Department of State's records.	ents, this date wil
ARTICLE VI: Other provisions, if any		
N/A		
·		
REQUIRED SIGNATURE:	Mr. Steve Burton	
	C TO DIAMOND	
Signature of	f a member or an authorized	
Signature of secured in accordance with section submitted in a decrease with section secti	f a member or an authorized representative of a member.	This document is
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