

10/8/2020

Division of Corporations

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

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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.  
SECURE COMMUNICATIONS SOLUTIONS LLC**

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

J. FASON

OCT 09 2020

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ELECTRONIC  
FILING  
DIVISION

Electronic Filing Menu

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Help

**ARTICLE I - Name:**

SECURE COMMUNICATIONS SOLUTIONS LLC

**ARTICLE II - Address:**

**Principal Office Address:**

**Mailing Address:**

(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.)

**BEHZAD CESAR RAVAN, CPA**

Name

**444 BRICKELL AVENUE, SUITE 428**

**Florida street address (P.O. Box NOT acceptable)**

MIAMI, FLORIDA 33131

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 605, F.S..

**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:

FRED GALLART  
13621 DEERING BAY DRIVE, PH 1403  
CORAL GABLES, FL 33158

**ARTICLE V:** Effective date, if other than the date of filing: 10/6/2020 . (OPTIONAL)

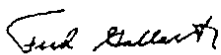
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.

N/A

REQUIRED SIGNATURE:



Fred Gallart

2020.10.07

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X

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.

FRED GALLART

Typed or printed name of signer