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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 Phone : (845)425-0077 : (845)818-3588 Fax Number

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

Email Address: andreihopkins123@gmail.com

FLORIDA LIMITED LIABILITY CO. FAST PASTE LOADS LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is: FAST PASTE LOADS 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: Mailing Address: Principal Office Address: 271 Avenue O 271 Avenue O Riviera Beach, FL 33404 Riviera Beach, FL 33404 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:

Andrei Hopkins

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271 Avenue O
Florida street address (P.O. Box NOT acceptable)

Riviera Beach, FL 33404

Cly State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company \boldsymbol{a} the place designated in this certificate. Thereby accept the appointment as registered agent and agree to act in \boldsymbol{l} is expacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance \boldsymbol{f} my duties, and \boldsymbol{l} am familiar with and accept the obligations of my position as registered agent as provided for \boldsymbol{in} Gepts 605. IS

Registered Agent's Signature (EQI RED)

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	And of the dates
AMBR	Andrei Hopkins 271 Avenue Q
	271 Avenue O Riviera Beach, FL 33404
(Use attachment if necessary)	
ARTICLEV: Effective date, if other than the da	ate of filing (OPTIONAL)
(If an effective date is listed, the date must be s	specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	and the Park Control of the Control
the document's effective date on the Departmen	it meet the applicable statutory filing requirements, this date will not be listed
	in of order of feet and
ARTICLE VI: Other provisions, if any,	
DEALINED SIZE ATOR	
REQUIRED SIGNATURE:	
	
	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.

Andrei Hopkins Araba | 150 2

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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