

(((H21000216278 3)))



H210002162783ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

_		
Т	а	٠

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FASTKIT CORP

Account Number : I2010000009 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. EMESQUITA, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - NAME

The name of this Limited Liability Company is EMESQUITA, LLC.

#### **ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the limited liability company is 8950 NW 27 Street, Doral, Florida 33172.

# ARTICLE III- REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

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

OSWALDO DE MESQUITA, 8950 NW 27 Street, Doral, Florida 33172.

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.FS.

OSWALDO DE MESQUITA, Registered Agent

**ARTICLE IV - UNITS** 

This limited liability company is authorized to issue 1,000 units.

SECRUTARY OF STATE TALEARASSEE & SECRETARY OF STATE

### ARTICLE V- MANAGEMENT AND MEMBERS

The limited liability company is manager-managed for purposes of s. 605.0407 and other relevant provisions of said chapter. The name and address of each person authorized to manage and control the Limited Liability Company:

OSWALDO DE MESQUITA

8950 NV 27 Street, Doral, Florida 33172.

(Manager, "MGN")

ELENIR DE MESQUITA

8950 NW 27 Street, Doral, Florida 33172.

(Manager, "MGR")

REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member.

OSWALDO DE MESQUITA

8950 NW27 Street, Dogal, Florida 33172.

(Member

ELENIR DE MESQUITA

8950 NW Street, Doral, Florida 33172.

(Member) /

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)