Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000295410 3)))



H210002954103ABCY

To:  From:  **Enter	Account Name Account Number Phone Fax Number the email addre	: (850)617-6381 : FASTKIT CORP : 120100000009 : (305)599-0839 : (305)592-9591	ss <b>entity</b> to be used	ALLAHASSEE, FL	2021 AUG -4 PH 4: 10
ann	ual report mail	ings. Enter only o	ne email address plo	ease.**	
ann	ual report mail il Address:	ings. Enter only o	ne email address plo	ease.**	
ann	uai report mail	ings. Enter only o	ne email address plo	ease.**	707
ann	il Address:	ings. Enter only o  DA LIMITED LI  L GLOBAL TRA	ne email address plo	ease.**	202 AUS4
ann	il Address:	DA LIMITED LI	ne email address plo	ease.**	4-503
ann	il Address:  FLORI	DA LIMITED LI L GLOBAL TRA	ABILITY CO.	ease. **	11 th 508
ann	il Address:  FLORI  Florificate of	DA LIMITED LI L GLOBAL TRA	ABILITY CO.	asse. **	4-503

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE 1 - Name:**

The name of the Limited Liability Company is:

FL GLOBAL TRADE 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:

8360 WEST FLAGLER STREET, SUITE 200 MIAMI, FL 33144

Mailing Address:

8360 WEST FLAGLER STREET, SUITE 200 MIAMI, FL 33144

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:

RAVAN AND COMPANY LLLP

Name

8360 WEST FLAGLER STREET, SUITE 200

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

MIAMI, FLORIDA 33144

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 amifamiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, FS.

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:

NARESH J. BHAGIA, MANAGER 8360 WEST FLAGLER STREET, SUITE 200 MIAMI, FL 33144

ARTI NARESH, MANAGER 8360 WEST FLAGLER STREET, SUITE 200 MIAMI, FL 33144

ARTICLE V: Effective date, if other than the date of filing:	<u>8/2/2021</u> . (0	PTIONAL)
(If an effective date is listed, the date must be specific and cardays after the date of filling.)	nnot be more than five business days pric	or to or 90
Note: If the date inserted in this block does not meet the app not be listed as the document's effective date on the Departm	plicable statutory filing requirements, this ment of State's records.	date will
ARTICLE VI: Other provisions, if any.		
N/A		
		<del></del>
REQUIRED SIGNATURE:		
<u>Dlugto</u>		
Signature of a member or an authoriz executed in accordance with section 605.0203 (1) (b), Florida submitted in a document to the Department of State constitutes.817.155, F.S.	ted representative of a member. This do Statutes. I am aware that any false infor utes a third-degree felony as provided fo	mation
Naresh J. Bhagia		
Typed or printed nam	ne of signee	