

L21000378334

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H21000316074 3)))



H210003160743ABCY

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

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.
JAHGUIDE LION ENTERPRISE, LLC**

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

Electronic Filing Menu

Corporate Filing Menu

Help

SECRET
TALLAHASSEE, FL

2021 AUG 23 PM 2:05

FILED

2021 AUG 23 PM 3:30

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is:

JAHGUIDE LION ENTERPRISE, LLC

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2311 EVERGLADES DRIVE

2311 EVERGLADES DRIVE

MIRAMAR, FL 33023

MIRAMAR, FL 33023

ARTICLE III-Registered Agent, Registered Office, & Registered Agent's Signature:

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

JONATHAN CLARKE

Name

2311 EVERGLADES DRIVE

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

MIRAMAR, FL 33023

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 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 provided for in chapter 605 F.S.


Registered Agent's Signature

STATE OF FLORIDA
TALLAHASSEE, FL

2021 AUG 23 PM 2:05

FILED

ARTICLE IV-

The name and address of each Manager or Managing Member is as follows:

Title:

"AMBR"= Authorized Member

"MGR"= Manager

Name and Address:

AMBR

JONATHAN CLARKE

2311 EVERGLADES DRIVE

MIRAMAR, FL 33023

(Use attachment if necessary)

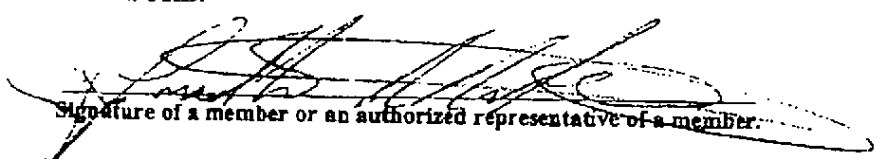
ARTICLE V: Effective date, if other than the date of filing _____.(Optional)

(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.)

ARTICLE VI: Other provisions, if any.

For the purpose of Transportation and any other business.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a 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.)

JONATHAN CLARKE

Typed or printed name of signee