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Florida Department of State
Division of Corporations
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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.
MIFSUT LLC

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

HL

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

MIFSUT LLC

ARTICLE II – Address:

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

Principal Office Address:

11450 NW 82ND TER
DORAL FL 33178

Mailing Address:

11450 NW 82ND TER
DORAL FL 33178

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

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

MANUEL MIFSUT

Name

11450 NW 82ND TER
Florida Street address

DORAL FL 33178
City, State and Zip

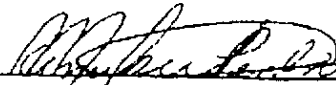
Having been named as registered agent and to accept service of process for the above stated limited liability Company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to

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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

ARTICLE IV – Manager or Managing Member is as follows:

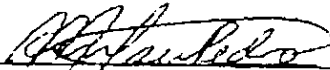
Title:

Name and Address

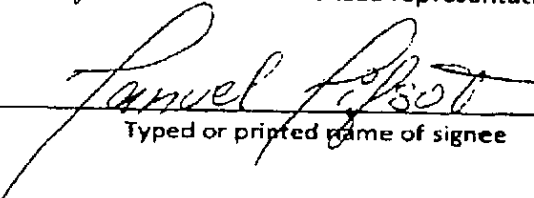
MGR

MANUEL MIFSUT
11450 NW 82ND TER
DORAL FL 33178

ARTICLE V – Effective date is February 2nd, 2022.



Signature of a member or an authorized representative of a member



Typed or printed name of signee

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