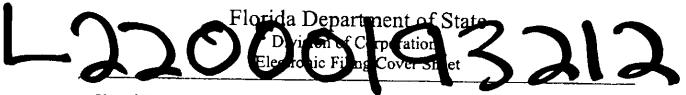
Division of Corporations



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: (850)617-6381

From:

Account Name : FASTKIT CORP Account Number : I201000000000

Phone

: (305)599-0839 : (305)592-9591

Fax Number

(303)332-3331

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

Ema11	Address:			

## FLORIDA LIMITED LIABILITY CO. COSMO FRUIT GLOBAL LLC

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\*\*\*GROUND\*\*\*

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	•			
COSMO FRUIT G	LOBAL LLC			
(Must con	ntain the words "Limited I	Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street	address of the principal of	ffice of the Limited	Liability Company is:	
<u>Princi</u>	Principal Office Address:		Mailing Address:	
1665 NW 102 AVE	SUITE 108	166.	5 NW 102 AVE, SUITE 108	
Doral, Fl 33172  ARTICLE III - Registered A (The Limited Liability Compar	gent, Registered Office, &	Dors  Registered Agen Registered Agent.	l, FI 33172	
ARTICLE III - Registered A (The Limited Liability Compar another business entity with ar	gent, Registered Office, & ny cannot serve as its own nactive Florida registration	Registered Agent. (n.)	nt's Signature:	
Doral, Fl 33172  ARTICLE III - Registered A	gent, Registered Office, & ny cannot serve as its own nactive Florida registration	Registered Agent. (n.)	nt's Signature: You must designate an individual or	
Doral, Fl 33172  ARTICLE III - Registered A (The Limited Liability Compar another business entity with ar	gent, Registered Office, only cannot serve as its own active Florida registration address of the registered	Registered Agent. (n.)	nt's Signature: You must designate an individual or	
Doral, Fl 33172  ARTICLE III - Registered A (The Limited Liability Compar another business entity with ar	gent, Registered Office, only cannot serve as its own active Florida registration address of the registered	Registered Agent. Segistered Agent. Segistered Agent. Segistered Agent. Segistered Agent. Segistered Agent are:	nt's Signature: You must designate an individual or	
Doral, Fl 33172  ARTICLE III - Registered A (The Limited Liability Compar another business entity with ar	gent, Registered Office, & its own a active Florida registration taddress of the registered WEST KENDALL R	Registered Agent. Son.) agent are: EGISTERED AGE Name	nt's Signature: You must designate an individual or	
Doral, Fl 33172  ARTICLE III - Registered A (The Limited Liability Compar another business entity with ar	gent, Registered Office, & sy cannot serve as its own a active Florida registration address of the registered  WEST KENDALL R  5600 SW 135 AVE, S	Registered Agent. Son.) agent are: EGISTERED AGE Name	nt's Signature: You must designate an individual or	

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, F.S..

GABRIEL DIAZ-SARMIENTO

Registered Agent's Signature (REQUIRED)

(CONTINUED)

CABLE AND/OR VIDEO FRANCHISING DIVISION OF CORBOTTON

.74

<u>Title:</u> "AMBR" = Authorized Membe	Name and Address:
"MGR" = Manager	
AMBR	Lopez Noguera, Mauricio
	1665 NW 102 AVE, SUITE 108 DORAL, FL 33172
	2014 111 11 111 11
AMBR	Arguello ColmenareS, Jose Ulices
12.25.	1665 NW 102 AVE, SUITE 108
	Darol, Fk 31172
MGR	Diaz-Sarmiento, Gabriel Sergio
	5600 SW 135 Ave, Suite 106R Miami, FL 33183
	риані, гр. 33163
•	
(If an effective date is listed, the date ma the date of filing.)	is the date of filing:
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	GABRIEL DIAZ-SARMIENTO
This document: I am aware that	of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes, any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.
Gabriel S	Greio Diaz-Sarmiento - MGR
	Typed or printed name of signee

CAULE AND/OR VIDEO FRANCHISING FRANCHISING DIVISION OF CORPORATIONS