

10/21/2022

Division of Corporations

C22000459173

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.

(((H22000362124 3)))



H220003621243ABCW

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.
GARDENIA GARDENS INN, LLC**

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

2022 OCT 21 PM 4:43

22 OCT 21 PM 12:35
FALLADAMORE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

**Electronic Articles of Organization
For
Florida Limited Liability Company
Article I**

The name of the Limited Liability Company is:

GARDENIA GARDENS INN, LLC

Article II

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

8691 NW 24th CT

Pembroke Pines, FL 33024

The mailing address of the Limited Liability Company is:

8691 NW 24th CT

Pembroke Pines, FL 33024

Article III

The purpose for which this Limited Liability Company is organized is:

REAL ESTATE BUSINESS- AIRBNB

Article IV

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

BRYANT and ASSOCIATE P.A

847 NW 119 ST STE 205

MIAMI, FL 33168

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.

Registered Agent Signature: _____

Bernard H Bryant

Article V

The name and address of managing members/managers are:

Title: MGR

GREG MICHAEL LEKNES

8691 NW 24th CT

Pembroke Pines, FL 33024

Signature of member or an authorized representative of a member

Signature: _____

GREG MICHAEL LEKNES

22 OCT 21 PM 12:35
ST. CATHARINE
PALM BEACH, FL 33404