## L23 GG-GG-GG-St2181 Division of Corporations Electronic Filing Cover Sheet

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	To:			
		Division of Corporations		
		Fax Number : (850)617-6381		
<del>!</del>	From:			
		Account Name : LAZARUS CORPORATE FILING SERVICE, INC.		
		Account Number : I200000000019		
		Phone : (305)552-5973	200	
		Fax Number : (305)675-5944	دب	
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	**1	Enter the email address for this business entity to be used for future	· 1/2	
		annual report mailings. Enter only one email address please. **	္ က	
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## FLORIDA LIMITED LIABILITY CO. MT FAST SERVICES LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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Corporate Filing Menu

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ARTICLE I - Name:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
MT FAST SERVICES LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
5425 SW 117 AVE
MiAni, FL33175
ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (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.)
Yovanis Meneses Tolosa 900 3
5425 SW 117 AVE 74 8
Miami Fl 33175
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
yovanis Meneses Tolosa
(AMBR)

## Required Signatures:

Signature of a member of 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.

Yovan's MENESES Tolosa

Typed or printed name of signee

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's Signature (REQUIRED)