

3/16/23, 1:50 PM

Division of Corporations

**L23000121988**  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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To:

Division of Corporations  
 Fax Number : (850)617-6381

From:

Account Name : FASTKIT CORP  
 Account Number : I20100000009  
 Phone : (305)599-0830  
 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.**  
**KAYSER PLUMBING HEATING & AIR CONDITIONING LLC**

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

2023 MAR 15 PM 1:35  
 TALLAHASSEE, FL

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME:**

The name of the Limited Liability Company is:

**KAYSER PLUMBING HEATING & AIR-CONDITIONING LLC**

(Must end with the words "Limited Liability Company" "LLC" or L.L.C.)

**ARTICLE II - Address:**

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

**Principal Office Address:**

**Mailing Address:**

**5101 MATANZAS AVE  
FORT PIERCE, FL 34946**

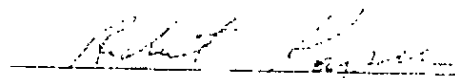
**5101 MATANZAS AVE  
FORT PIERCE, FL 34946**

**ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:**  
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active FL registration.)

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

**ROBERT KAYSER  
5101 MATANZAS AVE  
FORT PIERCE, FL 34946**

Having been named as registered agent and to accept service of process for the above state limited liability company at the place designated in this certification, 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

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**ARTICLE IV - Manager(s) or Managing Member(s):**

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

Title:

Name and Address:

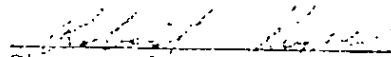
**Managing Member**

**ROBERT KAYSER  
5101 MATANZAS AVE  
FORT PIERCE, FL 34946**

**ARTICLE V - Effective date, if other than the date of filing: March 15, 2023**

(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.)

**Required Signature:**

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member:

(In accordance with section 605.0203 Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**Robert Kayser**

typed or printed name of signee

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