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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. **

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FLORIDA LIMITED LIABILITY CO.

Power Steel Gems, LLC

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Estimated Charge	\$155.00

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Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Power Steel G	ems. LLC.		
(Must conta	in the words "Limited	d Liability Company, '	L.L.C.," or "LLC.")	 -
ARTICLE II - Address:				
"he mailing address and street ad	ldress of the principal	office of the Limited !	Liability Company is.	
Principa	Office Address;		Mailing Addr	ress:
2822 Pine Tree Dr. Ar Miami Beach, FL 331				

The Limited Liability Company of	cannot serve as its ow	n Registered Agent, Y	t's Signature: ou must designate an inc	odividual or
The Limited Liability Company of	cannot serve as its ow	n Registered Agent, Y	t's Signature: ou must designate an inc	odividual or
the Limited Liability Company of the business entity with an ac	cannot serve as its ow ctive Florida registrati	n Registered Agent, Y ion.)	t's Signature: ou must designate an inc	
the Limited Liability Company of inother business entity with an ac	cannot serve as its ow ctive Florida registrati	n Registered Agent, Y ion.)	t's Signature: ou must designate an inc	
i he Limited Liability Company of mother business entity with an ac	cannot serve as its ow ctive Florida registrati ddress of the registere	n Registered Agent, Y ion.)	t's Signature: ou must designate an inc	SECRE Tall
i he Limited Liability Company of mother business entity with an ac	cannot serve as its ow ctive Florida registrati ddress of the registere	n Registered Agent. Y ion.) ad agent are: Name	t's Signature: ou must designate an inc	SECRE Tall
i he Limited Liability Company of mother business entity with an ac	cannot serve as its own tive Florida registration ddress of the registere Danieska Garcia 2822 Pine Tree Dr. 2	n Registered Agent. Y ion.) ad agent are: Name	ou must designate an inc	SECRETARY I
ARTICLE III - Registered Ager (The Limited Liability Company of another business entity with an ac-	cannot serve as its own tive Florida registration ddress of the registere Danieska Garcia 2822 Pine Tree Dr. 2	n Registered Agent, Y ion.) ad agent are: Name	ou must designate an inc	

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 conficate, 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, 5.5.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

. . . .

Title:	Name and Address:	
"AMBR" = Authorized Member	Same and Address:	
"MGR" = Manager		
AMBR	Danieska Garcia	
	2822 Pine Tree Dr. Apt 6	
	Miami Beach, Fi 33 40 CO	28
MGR	≥ C	2023 APR 26
N.CIR	Yoandry Besada 2822 Pine Tree Dr. Apt 6	<u>-5</u>
	Miami Beach, FL 33140	20 (A
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		₹ }
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	r-A	+
	m	7
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date	te of filing: (OPTIONAL)	
If an effective date is listed, the date must be s	pecific and cannot be more than five business days prior to or 90 di	sys after
he date of filing.)	mant the continual course of the course of t	
the document's effective date on the Departmen	meet the applicable statutory filing requirements, this date will not be	e listed as
	not suce steepids.	
ARTICLE VI: Other provisions, if any,		
		
REQUIRED SIGNATURE:		
	RCH	
<u></u> 2	SM.	
Signature of a m	tember or an authorized representative of a member.	
Signature of a m This document is executed an aware that any fals	nember or an authorized representative of a member, outed in accordance with section 605.0203 (1) (b), Florida Statutes, the information submitted in a document to the Department of State	
Signature of a m This document is executed an aware that any fals	tember or an authorized representative of a member.	
Signature of a m This document is exect I am aware that any fals constitutes a third degre	nember or an authorized representative of a member, outed in accordance with section 605.0203 (1) (b), Florida Statutes, the information submitted in a document to the Department of State	

Filing Fees:
5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional)

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