

4/25/23, 1:09 PM

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Division of Corporations

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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

2nd Request

From:
Account Name : FASTKIT CORP
Account Number : 120100000009
Phone : (305)599-8839
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: _____

SECRETARY OF STATE
2023 APR 25 PM 12:57
FILED

**FLORIDA LIMITED LIABILITY CO.
CORNER BOY PLAZA, LLC**

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

4-25-23

We do not know why this LLC was rejected? Please.

The registered agent designated is an active FL entity.

Electronic Filing Menu

Corporate Filing Menu

Help



April 26, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FASTKIT CORP

SUBJECT: CORNER BOY PLAZA, LLC
REF: W23000C60615

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

If you have any further questions concerning your document, please call (850) 245-6052.

Crystal S Hightower
Regulatory Specialist II
CoT

FAX Aud. #: H23000153980
Letter Number: 923A00009342

DocuSign Envelope ID: CD6C57F6-A7C3-48B7-A4D3-457794B1FD90

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CORNER BOY PLAZA, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

3050 SW 38th Court
Miami, FL 33146

3050 SW 38th Court
Miami, FL 33146

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 Florida registration.)

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

LAW OFFICES OF OSCAR J. RODRIGUEZ, P.A.

Name

3850 Bird Road, Suite 903

Florida street address (P.O. Box NOT acceptable)

Miami FL 33146
City State Zip

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.

Digitally signed by

OSCAR RODRIGUEZ

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2023 APR 25 PM 12:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DocuSign Envelope ID: CD6D57F6-A7C3-46B7-A4D3-457794B1FD90

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

ALEX PIREZ
3050 SW 38TH COURT
MIAMI FL 33146

MGR

MATTHEW SAFCHIK
P.O. BOX 2051
PARK CITY UT 84060

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

THE COMPANY SHALL BE A MANAGER-MANAGED ENTITY.

REQUIRED SIGNATURE:

Designated by:

Matthew Safchik

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

MATTHEW SAFCHIK

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)