

6/23/23, 2:04 PM

Division of Corporations

**L23 000 303947**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

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Account Name : FASTKIT CORP  
Account Number : I20100000009  
Phone : (305)599-0839  
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**\*\*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.  
MEGA WORLD SUPPLIES, LLC**

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Estimated Charge	\$155.00

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Corporate Filing Menu

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

**ARTICLE I – Name:**

The name of the Limited Liability Company is:

**MEGA WORLD SUPPLIES, LLC.**

**ARTICLE II – Address:**

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

**Principal Office Address:**

4995 NW 72nd Avenue, Suite #205  
Miami, Florida 33166

**Mailing Address:**

4995 NW 72nd Avenue, Suite #205  
Miami, Florida 33166

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

**WOBPINC, INC.**  
4995 NW 72nd Avenue, Suite #205  
Miami, Florida 33166

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

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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:

AMBR

Name and Address

MARIA A ABOULHOSN

4995 NW 72nd Avenue, Suite #205  
Miami, Florida 33166

Title:

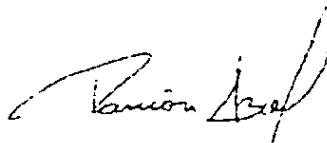
MGR

Name and Address

RAMZY R ABOULHOSN

4995 NW 72<sup>nd</sup> Avenue, Suite #205  
Miami, Florida 33166

**REQUIRED SIGNATURE:**



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

(In accordance with section **605** Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

Ramzy R Aboulhossn

Typed or printed name of signer

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23 JUN 23 AM 6:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA