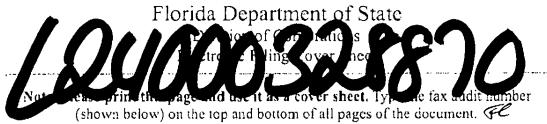
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Division of Corporations



(((H24000255581 3)))

7-30-24



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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. **

Email Address:__

FLORIDA LIMITED LIABILITY CO. FORT LAUDERDALE BEACH RESTAURANT, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ALE BEACH RESTAURAN			
(Must co	main the words "Limited Liab	ility Company, "L.	L.C.," or "LLC.")	
RTICLE II - Address:				
he mailing address and street	address of the principal office	of the Limited Lin	ability Company is:	
<u>Princi</u>	ipal Office Address:		Mailing Address:	:
905 N Fort Lauder	dale Beach Blvd	905 N I	on Lauderdale Beach Bly	vd
			 	
17	gent, Registered Office, & R	egistered Agent's	•	4
RTICLE III - Registered A	gent, Registered Office, & R ny cannot serve as its own Reg	egistered Agent's	Signature:	
RTICLE UI - Registered A The Limited Liability Compar nother business entity with ar	gent, Registered Office, & R ny cannot serve as its own Reg	egistered Agent's istered Agent. You	Signature:	
RTICLE UI - Registered A The Limited Liability Compar nother business entity with an	gent, Registered Office, & R ny cannot serve as its own Reg n active Florida registration.)	egistered Agent's istered Agent. You	Signature:	
RTICLE UI - Registered A The Limited Liability Compar nother business entity with ar	gent, Registered Office, & R ny cannot serve as its own Reg n active Florida registration.) at address of the registered age ANGELICA OSORIO	egistered Agent's istered Agent. You	Signature:	2021 JUL 29
RTICLE UI - Registered A The Limited Liability Compar nother business entity with ar	gent, Registered Office, & R ny cannot serve as its own Reg n active Florida registration.) at address of the registered age ANGELICA OSORIO	egistered Agent's istered Agent. You nt are:	Signature:	2024 JUL 29
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ARTICLE UI - Registered A The Limited Liability Compar nother business entity with ar	gent, Registered Office, & R ny cannot serve as its own Reg n active Florida registration.) at address of the registered age ANGELICA OSORIO Na 905 N Fort Lauderdale Be	egistered Agent's istered Agent. You nt are: me each Bivd	Signature: a must designate an individ	

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..

Angelica Osorio
Registered Agent's Signature (REQUIRED)

(CONTINUED)

"AMBR" = Authorized Member "MGR" = Manager	Same and Address:
.MGR	ANGELICA OSORIO 905 N Fon Lauderdale Beach Blyd FORT LAUDERDALE, FL 33304
MGR	LEYNIER GARCIA VIERA 905 N Fort Lauderdale Beach Blvd FORT LAUDERDALE, FL 33304
	
(Use attachment if necessary)	
effective date is listed, the date must te of filing.)	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be littern of State's records
	2024
CLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Angelica Osorio