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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)617-6383

From: Account Name : FASTKIT CORP
 Account Number : I20100000009
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
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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.
ATHOS INVESTMENTS GROUP, LLC

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

K. BALLY
EXAMINER
 NOV 14 2014

November 13, 2014

FASTKIT CORP

SUBJECT: ATHOS ENTERPRISES, LLC
REF: W14000068528

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L10000040371 "ATHOS ENTERPRISES, LLC".

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If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

850-617-6381

11/13/2014 12:24:43 PM PAGE 2/002 Fax Server

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H14000262987
Letter Number: 314A00024173

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ATHOS INVESTMENTS GROUP, LLC

(Must end with 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:

2951 S. Bayshore Dr. #708
MIAMI, FL 33133

Mailing Address:

2951 S. Bayshore Dr. #708
MIAMI, FL 33133

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:

Jose Marcos Pellegati

Name

2951 S. Bayshore Dr. #708

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

MIAMI FL 33133

City

Zip

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TALLAHASSEE, FLORIDA

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.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

AMBR

AMBR

Name and Address:

Jose Marcos Pellegatti

2951 S. Bayshore Dr #708

MIAMI, FL 33133

MARIA Cecilia Pellegatti

2951 S. Bayshore Dr. #708

MIAMI, FL 33133

Natale P. V. Pellegatti

2951 S. Bayshore Dr #708

MIAMI, FL 33133

(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

[Handwritten Signature]

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

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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. 817.156, F.S.)

Jose Marcos Pellegatti
Typed or printed name of signer

2014 NOV 13 AM 8:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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