Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000003380 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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. FERREIRO CARGO LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| RTICLE II - Address:  |  | bility Company, "L.L.C.," or "LLC.")   |
|---|--|--|
|   | iddress of the principal offic   |  |
| he mailing address and street a   | address of the principal office  |  |
|   | or or are brineibat office   | e of the Limited Liability Company is:   |
| <u>Princir</u>  | oal Office Address:  | Mailing Address:   |
| 15325 SW 145TH C  | e <b>T</b>   | 15325 SW 145TH CT  |
| MIAMI FL 33177  |  | MIAMI FL 33177   |
| te Limited Liability Company other business entity with an                                    | y cannot serve as its own Res<br>active Florida registration.)   |  |
| he Limited Liability Company other business entity with an                                    | y cannot serve as its own Reg<br>active Florida registration.)<br>address of the registered age<br>ROBERTO FE      | gistered Agent. You must designate an individual o   |
| he Limited Liability Company other business entity with an                                    | y cannot serve as its own Reg<br>active Florida registration.)<br>address of the registered age<br>ROBERTO FE      | gistered Agent. You must designate an individual o ent are: ERREIRO MARTINEZ ame               |
| the Limited Liability Company other business entity with an anche name and the Florida street | y cannot serve as its own Reg active Florida registration.) address of the registered age  ROBERTO FE No.  15325 S | gistered Agent. You must designate an individual o ent are: ERREIRO MARTINEZ                   |
| he Limited Liability Company<br>other business entity with an                                 | y cannot serve as its own Reg active Florida registration.) address of the registered age  ROBERTO FE No.  15325 S | gistered Agent. You must designate an individual o ent are:  ERREIRO MARTINEZ ame  SW 145TH CT |

(CONTINUED)

| Title: "AMBR" ▼ Authorized Member "MGR" ▼ Manager  | Name and Address:   |
|--|---|
| AMBR   | ROBERTO FERREIRO MARTINEZ  15325 SW 145TH CT  MIAMI FL 33177  |
|  |   |
|  |   |
|  |   |
|  |   |
| EV: Effective date, if other than the di-<br>ctive date is listed, the date must be  | ate of filing (OPT(ONAL) specific and cannot be more than five business days prior to or 9  |
| EV: Effective date, if other than the dictive date is listed, the date must be filling.) the date inserted in this block does no   | specific and cannot be more than five business days prior to or 90<br>it meet the applicable statutory filing requirements, this date will no                   |
| ctive date is listed, the date must be<br>f filling.)  | specific and cannot be more than five business days prior to or 90<br>it meet the applicable statutory filing requirements, this date will no                   |
| EV: Effective date, if other than the decrive date is listed, the date must be filling.) the date inserted in this block does no nent's effective date on the Departme EVI: Other provisions, if any.  REQUIRED SIGNATURE:   | specific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not of State's records. |
| EV: Effective date, if other than the decrive date is listed, the date must be filling.) the date inserted in this block does not neat's effective date on the Departme EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a control of the decument is executed an aware that any factorized and aware that any factorized are series and aware that any factorized are series as a series and aware that any factorized are series as a series and a series are series as a series are series are series as a series are series are series are series as a series are series are series are series as a series are serie | specific and cannot be more than five business days prior to or 90<br>it meet the applicable statutory filing requirements, this date will no                   |