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To:

Division of Corporations

Fax Number : (852)617-6381

From:

Account Name : FASTKIT CORP Account Number : 1201000000009 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.

Certificate of Status	0
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GOLD WAVE INVESTMENT PROPERTIES, LLC

Electronic Filing Menu Corporate Filing Menu

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

GOLD WAVE INVESTMENT PROPERTIES, 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:	
2766 NW 62 St.	2766 NW 62 St.	
Miami, FL 33147	Miami, FL 33147	

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:

Megan Gonzalez 2766 NW 62 St. Miami, FL 33147

Having been named as registered agem to accept service of process for the above stated longed trabiful 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 jumiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

Title:

"AMBR" - Authorized Member

"MGR" = Manager

Megan Gonzalez 2766 NW 62 St. Miami, FL 33147 Title: MGR

2025 Jan 28 Br 7: 56

(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.)

REQUIRED SIGNATURE:

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.)

Megan Gonzalez

Typed or printed name of signee