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(Requestor's Name)
(Address)
(Address)
(City (Chata Pin ID) and 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
,
(Business Entity Name)
(Document Number)
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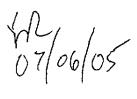
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SECRETARY OF STATE ALL AHASSEE, FLORIDA

EIFED



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: KENNEDY REAL ESTATE PROMOTEES L.L.C (Name of Limited Liability Company)	·
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
(Name of Person)	
*	
	AFEC SEC
(Firm/Company)	## F
	ASS. 6
	mg 3 1
(Address)	MID: I
	PART IS
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at () (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\Boxed{\sigma}\$\$ \$130.00 Filing Fee & \$\Boxed{\sigma}\$\$ \$155.00 Filing Fee & \$\Boxed{\sigma}\$\$ \$160.00 Certificate of Status	0 Filing Fee, of Status &
(additional copy is enclosed) Certified Co	
STREET ADDRESS: MAILING ADDRESS:	
Registration Section Registration Section Division of Corporations Division of Corporations	
409 E. Gaines Street P.O. Box 6327	

Tallahassee, Florida 32399

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

KENNEDY REAL ESTATE PROMOTERS L.L.C.

ARTICLE II - Address:

Principal Office Address:

Mailing Address:

JACKSONVILLE, FL 3007 TAUS

1828 W. Pensacola St. #55 TALLAHASSE, FL 3254 G

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

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

TOMAS AGUSTIN JIMENEZ, Jr.

1828 West Pensacola St. #55
Florida street address (P.O. Box NOT acceptable)

TALLAHASSEE, FL 32304 City, State, and Zip

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 608, F.S..

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	TOMAS AGUSTIN JIMENEZ, J. 1828 West Pensacola St. #755 TALLAHASSEE, FL 32308
<u>. </u>	
	SECRE TALLAH
	e added if an effective date is requested.
REQUIRED SIGNATURE:	STATE OF T
(In accordance with secti	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)
TOMAS A	6USTIN JIMENEZ, JV. ed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)