## <u>L14000614657</u>

(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
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## COVER LETTER

TO:	Registration Section Division of Corporations		e A ja	\$
	Everstrong Commercial Products, LLC		•	
SUBJE	Name of Limited Liability Co	mpany	, , , , , , , , , , , , , , , , , , ,	·:
The en	aclosed Articles of Organization and fee(s) are submitted for fi	ling.	5. ; % - 6.	\$** *** ***
Please	return all correspondence concerning this matter to the follow	ring:		
	Joe Kaminsky			
	Name of Perso	n		
	K-tex, LLC			
	' Firm/Compan	<del> </del>		
	4500 East 11 Ave		,	•
	Address			
	Hialeah Florida 33013			
	City/State and Zip Joe@k-texllc.com			· .
	E-mail address: (to be used for futu	ire annual report no	otification)	
For fur	rther information concerning this matter, please call:			
Joe ł	Kaminsky 901 68	0 9026	•	٠.
		Daytime Telephone	Number	
7	sed is a check for the following amount:  00 Filing Fee \$\frac{130.00}{2}\$ \$130.00 Filing Fee \$\frac{155.00}{2}\$ Certificate of Status \$\frac{155.00}{2}\$ Certified Contact (additional contact to the following amount:	opy by is enclosed)	\$160.00 Filing Certificate of Certified Copy additional copy	Status &
	Registration Section Regis	et/Courier Address stration Section sion of Corporation		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limi	: ited Liability Company:	is:		
_		•	\$ 	
Everstrong Com	nmercial Products,	, LLC.	: 	
	(Must end with the wor	ds "Limited Liability Company, "	L.L.C.," or ("LLC.")	·
ARTICLE II - Adda The mailing address a		: principal office of the Limited Li	ability Company is:	
Principal Office Add	dress:	Mailing Address:	•	•
	N. (=			
		Same	. <u>— — </u>	
Hialeah, FL 330	istered Agent, Register	red Office, & Registered Agent's	s Signature:	
ARTICLE III - Reg The Limited Liability another business enti	istered Agent, Register	red Office, & Registered Agent's e as its own Registered Agent. Yo a registration.)	s Signature: u must designate an	individual or
ARTICLE III - Reg The Limited Liability another business enti	istered Agent, Register y Company cannot serve ity with an active Florida	red Office, & Registered Agent's e as its own Registered Agent. Yo a registration.)	s Signature: u must designate an	-4 -4
ARTICLE III - Reg The Limited Liability another business enti	istered Agent, Register y Company cannot serve ity with an active Florida orida street address of th	red Office, & Registered Agent's e as its own Registered Agent. Yo a registration.)	s Signature: u must designate an	-4 -4
ARTICLE III - Reg The Limited Liability another business enti	istered Agent, Register y Company cannot serve ity with an active Florida orida street address of th	red Office, & Registered Agent's e as its own Registered Agent. Yo a registration.)  the registered agent are:  ky  Name	s Signature: u must designate an	-4 -4
(The Limited Liabilit another business enti	istered Agent, Register y Company cannot serve ity with an active Florida orida street address of th Joseph Kaminsk 2861 Leonard D	red Office, & Registered Agent's e as its own Registered Agent. Yo a registration.)  the registered agent are:  ky  Name	s Signature: u must designate an	16 FEB -10
ARTICLE III - Reg The Limited Liability another business enti	istered Agent, Register y Company cannot serve ity with an active Florida orida street address of th Joseph Kaminsk 2861 Leonard D	red Office, & Registered Agent? e as its own Registered Agent. Yo a registration.) he registered agent are: ky Name Orive F410	s Signature: u must designate an	16 FEB -10

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

Title:	Name and Address:	•	
AMBR" = Authorized Member		•	
MGR" ≈ Manager AMBR	lessie		
AMBR	Regggie Teitler 4500 East 11 Ave	·	
	Hialeah, FL 3313	<del></del>	:
	Thalean, 7 L 30 13	1 ×	
MGB	Amy Schrader	; ;	
· · · · · · · · · · · · · · · · · · ·	711 Third Ave, St	ulte 1803	
	New York, Ny 100	)17	
		<u> </u>	
	·		
			-
		•	•
V: Effective date, if other than the ctive date is listed, the date must be	date of filing: be specific and cannot be more than fi	(OPTIONAL ive business days prior to	
f filing.)			
EV: Effective date, if other than the ctive date is listed, the date must be filling.)			
EV: Effective date, if other than the ctive date is listed, the date must be filling.)			o or 90
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CV: Effective date, if other than the ctive date is listed, the date must be filling.)  CVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (In accordance with sect constitutes an affirmatic I am aware that any false)	a member or an authorized represention 605.0203 (1) (b), Florida Statutes, ion under the penalties of perjury that the information submitted in a documer	ive business days prior to	o or 90
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