

L23000126527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

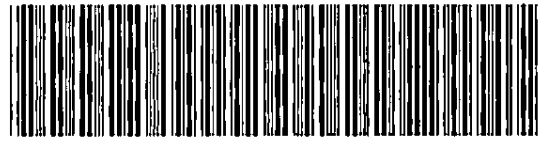
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000398833500

FILED

2023 MAR 20 PM 3:09

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

12/27/22--01002--023 \* 15.00

RECEIVED

2022 DEC 27 AM 11:38

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) - (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** MISTY 12/27

CERTIFIED COPY \_\_\_\_\_

XX PHOTOCOPY \_\_\_\_\_

CUS \_\_\_\_\_

XX FILING \_\_\_\_\_

LLC

1. KK CONSULTING LLC  
(CORPORATE NAME AND DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 28, 2022

CORPORATE ACCESS, INC.

SUBJECT: KK CONSULTING LLC  
Ref. Number: W22000157935

RECEIVED  
2023 MAR 20 AM 10:28  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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 L11000128180.

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham  
Regulatory Specialist II  
New Filing Section

Letter Number: 822A00028936

*Corrected*

ARTICLES OF ORGANIZATION  
FOR  
COWRIE HOUSE LLC  
FLORIDA LIMITED LIABILITY COMPANY

FILED  
2023 MAR 20 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE I - NAME:**

The name of the Limited Liability Company is: COWRIE HOUSE LLC

**ARTICLE II - ADDRESS:**

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

PRINCIPAL OFFICE ADDRESS:  
1555 Mullet Lane  
Naples, Florida 34102

MAILING ADDRESS:  
2390 Tamiami Trail North, Suite #204  
Naples, Florida 34103

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:** The Name and the Florida street address of the registered agent are:

Charles M. Kelly, Jr.  
Name  
2390 Tamiami Trail North, Suite #204  
Florida street address (P.O. Box **NOT** acceptable)  
Naples, Florida 34103  
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 605, F.S.*



Registered Agent's Signature

**ARTICLE IV - MANAGER(S) OF MANAGING MEMBER(S):**

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

TITLE:

"MGR" - Manager  
"MGRM" = Managing Member

MGR  
AMBR

NAME AND ADDRESS:

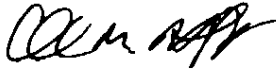
KRISTIN KELLY  
1555 Mullet Lane  
Naples, Florida 34102

(Use attachment if necessary)

**ARTICLE V - EFFECTIVE DATE**

The effective date of COWRIE HOUSE LLC is March 20, 2023

**REQUIRED SIGNATURE:**



\_\_\_\_\_  
Signature of a member or an authorized representative of a member.  
(In accordance with §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 in §817.155, F.S.)

\_\_\_\_\_  
Charles M. Kelly, Jr

FILED  
2023 MAR 20 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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)