#L11000082287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

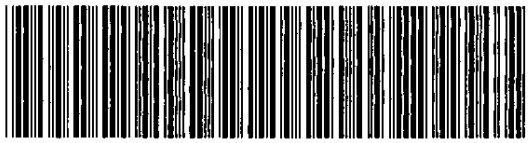
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED
11 JAN 19 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
JAN 20 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2011

KENNETH S. ROBINSON
6860 GULFPORT BOULEVARD #358
SOUTH PASADENA, FL 83707

SUBJECT: AEGK, LLC.
Ref. Number: W11000001828

We have received your document for AEGK, LLC. and your check(s) totaling $155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 311A00000973

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AEGK
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:

Kenneth S. Robinson
Name of Person

AEGK, LLC
Firm/Company

6860 Gulfport Boulevard #358
Address

South Pasadena, FL 83707
City/State and Zip Code

kochi12@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kenneth S. Robinson at (813) 758-2615
Name of Person — Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☑ $125.00 Filing Fee ☑ $130.00 Filing Fee & Certificate of Status ☐ $155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ $160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

January 8, 2011

Florida Department of State
Division of Corporations
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Dear Sir or Madam::

Please find enclosed the required document to form a Florida Limited Liability Company in the State of Florida.

A Cover Letter
B. Articles of Organization for Florida LLC
C. Check for $155.00 (Filing fee + Certified Copy

If you have any questions, please feel to contact me at the number listed in the cover letter.

Regards,

Kenneth S. Robinson, MS

cc: file
/ksr

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

AEGK, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "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:**
6860 Gulfport Boulevard #358 South Pasadena, FL 83707	621 Red Maple Place Atlanta, GA 30349

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:

Kenneth S. Robinson
Name

6860 Gulfport Boulevard #358
Florida street address (P.O. Box **NOT** acceptable)

South Pasadena FL 83707
City, State, and Zip

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11 JAN 19 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	**Name and Address:**
Managing Member	Arthur J. Foster 9151 Retreat Pass Jonesboro, GA 30236
Managing Member	Erin Hackney 621 Red Maple Place Atlanta, GA 30349
Managing Member	Glenn S. Alexander 532 Battleview Drive Smyrna, GA 30082
Manager	Kenneth S. Robinson 12157 W. Linebaugh Avenue #110 Tampa, FL 33626

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(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.

(In accordance with section 608.408(3), 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 for in s.817.155, F.S.)

Kenneth S. Robinson
Typed 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)