L0000000 1463

Form 1

TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Verifyer

DUC

SUBJECT: <u>Key West Business Systems Solutions</u> LLC

(Proposed limited liability company name - must include suffix)

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-02/03/00--01103--007

****125.00 *****125.00

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$100.00 Filing fee for Articles of Organization \$25.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$5 if a certificate of status is needed. The fee for a certified copy is \$30. Please send one check for the total amount made payable to the Florida Department of State.

TAMES W. KLEINBROOK
Name (Printed or typed) 4800 Gulfgate Lone
Address Mame Availability **Document** St. James City FL 33956
City, State & Zip Examiner レしじ Updater ncc 941-283-1693 Updater verifyer DCC Daytime Telephone number Actino-dedgement DCC.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Key West Business Systems Solutions 44C

ARTICLE II - Address:

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

4800 Gul7 gate Lane St. James City, Horida 33956

ARTICLE III - Registered Agent

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

James W. Kleinbrook 4800 Gultgate Lane St. James City, Florida 33956

ARTICLE IV - Management:

(Check the appropriate box)

In The Limited Liability Company is to be a manager-managed company.

☐ The Limited Liability Company is to be managed by the members.

mes le Klen root Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

James W. Kleinbrook

Typed or printed name of signee

Filing Fee: \$100.00 for Articles

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Key West Busines Systems Solutions, LLC	<u> </u>	18.1 mg
2. The name and the Florida street address of the registered agent are: Same & W. Kleinbrook NAME	00 FEB -3 PH 12: 52	DIVISION OF CORPORATIONS SECRETARY OF STATE STATE OF STAT

Having been names as registered agent and to accept service of process for the above stated; limited l; liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Filing Fee: \$25 for Designation of Registered Agent