

L000000004467

1330 Bellevue Street
P.O. Box 8100
Green Bay, Wisconsin 54302-2197

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. THE KERA GROUP, LLC
(Corporation Name) (Document #) 500003163935--9
-03/09/00--01074--009
****160.00 ****160.00
2. W-6892
(Corporation Name) (Document #)
3. L-4467
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____
☐ Mail out ☐ Will wait ☐ Photocopy

- ☐ Certified Copy
☐ Certificate of State

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

00 APR 18 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

W4/18



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 15, 2000

KI
1330 BELLEVUE STREET
PO BOX 8100
GREEN BAY, WI 54302-2197

SUBJECT: THE KERA GROUP, LLC
Ref. Number: W00000006892

*Melissa,
Let's do this
again. Thanks!
Rick*

We have received your document for THE KERA GROUP, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 400A00014326

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00 APR 18 PM 2:21
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
The KERA Group, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
2136 Mohican Trail, Maitland, FL 32751

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

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

ATL Rick Laughridge, JR 2136 Mohican Trail, Maitland, FL 32751

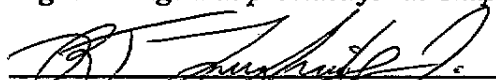
Richard T.

2136 Mohican Trail

Florida street address (P.O. Box **NOT** acceptable)
Maitland, FL 32751

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

Article IV - Management (Check box if applicable.)

ATL ☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)


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.)

ATL ~~Rick Laughridge, JR~~
Typed or printed name of signee

Rick Laughridge, JR

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA