

L0000000 4606

Florida Department of State
Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 922-4003

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

LIMITED LIABILITY COMPANY

MCCARTHY KUBACK LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 APR 20 AM 8:55

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TALLAHASSEE, FLORIDA

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H00000018343-4 **ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

MCCARTHY Kubach LLC

ARTICLE II - Address:

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

**615 NORTH O Street
LAKE WORTH, FL 33460**

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

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

BRENDAN MCCARTHY
Name
615 North O Street
Florida street address (P.O. Box NOT acceptable)
LAKE WORTH FL 33460
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.

Brendan McCarthy
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

BRENDAN MCCARTHY
615 North O Street
LAKE WORTH, FL 33460

KIRK E. KUBACH
21530 KAPOK Circle
BONITA RATON, FL 33433

Brendan McCarthy
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.)

BRENDAN MCCARTHY

Typed or printed name of signee

KIRKE. KUBACH

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: MCCARTHY Kubach LLC

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

BRENDAN MCCARTHY
NAME
615 NORTH O STREET
Florida street address (P. O. Box NOT ACCEPTABLE)
LAKE WORTH FL 33460
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.

Brendan McCarthy
SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

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