## Address City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) 600005694126---06/06/02--01029--007 \*\*\*\*160.00 \*\*\*\*160.00 (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ☐ Walk in Pick up time Certified Copy ☐ Mail out Photocopy ₩ill wait ☐ Certificate of Status NEW FILINGS **AMENDMENTS** ☐ Profit \_\_\_ □ Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability ☐ Change of Registered Agent Domestication ☐ Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other Examiner's Initials

CR2E031(7/97)

## ARTICLES OF ORGANIZATION FOR FLORIDA LEVELTED LIABILITY COMPANY

ARTICLE I - Name:
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The name of the Limited Liability Company is: Kinney Properties, LLC

## **ARTICLE II - Address:**

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

1040 White Pine Drive, Cary, Illinois 60013

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

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

Kevin Kinney	
Name	
10440 Boynton Plac	ce Circle
Florida street address (P.O. Box NOT acceptable)	
Boynton Beach	FL 33437-2626
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.)

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.)

## 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)