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JEURETARY OF STATE TALLAHASSEE, FLORIDA

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Kathern Stellmack
(Requestor's Name)

9202 Clipper Court
(Address)

West Palm Reach
(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:

The name of the Limited Liability Company is: Kabar Consulting, L.L.C.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 9202 Clipper Court, West Palm Beach, Florida 33411

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

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

Kathryn Stellmack	
Na	me
9202 Clipper Court	
Florida street address	(P.O. Box NOT acceptable)
West Palm Beach	FL 33411
City. Si	ate, and Zin

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.

Rogistered Agent's Signature

(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.)

Kathryn Stellmack

Typed or printed name of signee

#### 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)