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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
189, 524, 191 Office Use Only
189, 524, 671
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02/04/03--01036--002 **87.50





FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

February 5, 2003

KEVIN F KING PO BOX 1529 VALRICO, FL

SUBJECT: KING PROPERTIES FACILITIES MAINTENANCE CO LLC

Ref. Number: W03000003353

03 FEB 18 PM 4: 01

We have received your document for KING PROPERTIES FACILITIES MAINTENANCE CO LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

IF YOU ARE TRYING TO FILE A LIMITED LIABILITY COMPANY THE FILING FEE IS \$125.00.,

There is a balance due of \$37.50.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 703A00007666



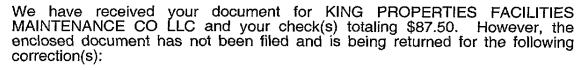
FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

February 5, 2003

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Letter Number: 703A00007666

Marsha Thomas Document Specialist D3 FEB 18 PM 4: 06

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:
The name of the Limited Liability Company is:
KING PROPERTIES FACILITIES MAINTENANCE CO. LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Po Rox 1829
P.O. BOX 1529 3809 UPLAND PL
VALRICO FL 33594
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
KEVIN F. KING Name Name 3809 UPLAND PLACE
Name
3809 UPLAND PLACE
Florida street address (P.O. Box NOT acceptable) VALRICO FL 33595
City, State, and Zip
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
V
(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

Filing Fees:

Typed or printed name of signee

that the facts stated herein are true.)

\$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)