

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone #	¥)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name	<u> </u>
(Do	ocument Number)	
Certified Copies	<u>Certificates c</u>	of Status
Special Instructions to	Filing Officer:	
		7/18
	Office Use Only	11180



07/18/03--01050--002 **125.00



TRANSMITTAL LETTER

Tallahassee, Florida 32399

TO: Registration Section Division of Corporations					
SUBJECT:		K.E.L. PROPERTY MANAGEMENT, INC.			
	_		(Name	f Limited Liability Company)	
The enc	closed 2	Articles	of Organization	and fee(s) are submitted for filing.	
Please r	return a	all corre	spondence conce	ning this matter to the following:	
MATT	ΓHEW	ENGLI	ΞΤΤ		
			(Name of Person)		
KAUF	MAN,	ENGL!	ETT & LYND, P	A.	
			(Firm/Company)		
733 W	V COL	ONIAL	DRIVE		
ORLA	NDO,	FLOR	(Address) IDA 32804		
			(City/State and Zip	Code)	
For furt	ther inf	formatic	on concerning this	matter, please call:	
MATT	THEW	ENGL	ETT	at (407) 481-2535	
		(Name o	of Person)	(Area Code & Daytime Telep	hone Number)
Registra	ration S on of Co	orporati		MAILING ADDRES Registration Section Division of Corporatio P.O. Box 6327	

Tallahassee, Florida 32314

03 JUL 16 AM 8: 35

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICI	LEI-	Name:
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The name of the Limited Liability Company is:

K. E. L. Property Management, LLC

ARTICLE II - Address:

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

733 W. Colonial Dr. Orlando, FL 32804

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

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

Mathew Englett

Name

133 W. Colonial Dr.

Florida street address (P.O. Box NOT acceptable)

Orlando FL 32804

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.)

[X]_The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional afficle 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.)

Matthew Englett
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)