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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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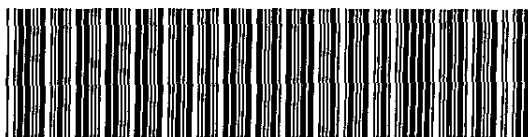
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS

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**W. HENRY O'CONNELL**

*Certified Public Accountant*

*2200 N. Ponce De Leon Blvd. Suite 10*

*St. Augustine, FL 32084*

*Phone (904) 829-0082 Fax 904 829-5030 e-mail: taxwhol@Bellsouth.net*

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August 8, 2003

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Dear Florida Department of State,

Enclosed are the articles of organization for Kaneret, L.L.C. and a check for \$125.00 to cover the filing fee and designation of registered agent. The name, mailing address and phone number of the signing member is: Farid Ashdji, 45 Anastasia Lakes Drive, St. Augustine, FL 32080, 904-806-0506. Should you have any questions, you may contact me at the above phone number.

Sincerely,



W. Henry O'Connell, CPA

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DIVISION OF CORPORATIONS  
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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: **Kaneret, L.L.C.**

## ARTICLE II - Address:

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

**2200 N. Ponce De Leon Blvd., #10, St. Augustine, FL 32084**

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

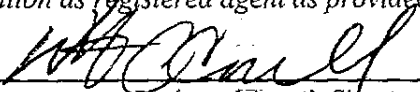
The name and the Florida street address of the registered agent are:

W. Henry O'Connell, CPA  
Name

2200 N. Ponce De Leon Blvd., #10  
Florida street address (P.O. Box NOT acceptable)

St. Augustine, FL 32084  
City, State, and Zip

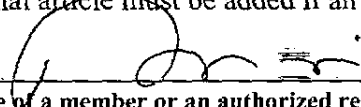
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.)

Farid Ashdji  
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)

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