

L03000032832

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

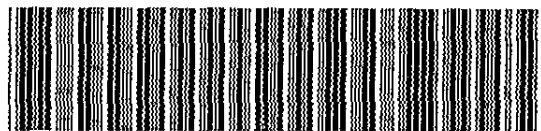
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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W. P. Verifier	DCC

Office Use Only



300022202233

10/29/03--01035--003 **160.00

FILED
03 AUG 29 AM 8 00
TALLAHASSEE, FLORIDA

Law Offices of
DAVID KERN PETELER

The Gilbert Law Building
22130 Clarendon Street
Woodland Hills, CA 91367
818.257.1644
ADMITTED IN CALIFORNIA

15124 Peteler Lane
Minnetonka, MN 55343
952.934.1961 phone
952.974.1032 fax

August 27, 2003

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Re: Kesselman - Davidson LLC

Dear Sir or Madam:

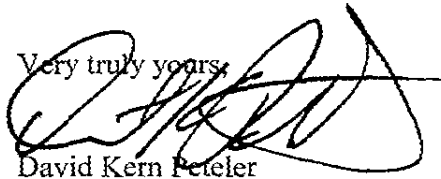
This office represents Kesselman-Davidson, LLC. Enclosed please find the Articles of Organization. Please file these Articles of Organization.

Enclosed also is a check in the amount of \$160. This is for the \$100 filing fee, the \$25 registered agent fee, and also for a Certified Copy (\$30) and a Certificate of Status (\$5). Would you please send the Certified Copy and the Certificate of Status to this office when they are ready.

Enclosed also is a copy of this transmittal letter. Would you kindly file-stamp the copy of this letter, and return it to the undersigned in the attached envelope, to evidence receipt and filing of the Articles of Organization.

Please call with any questions.

Very truly yours,



David Kern Peteler

DKP: daa
Enc.

FILED
03 AUG 29 AM 8:00
TALLAHASSEE, FL
REG. SEC. DIV.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KESSELMAN - DAVIDSON LLC

ARTICLE II - Address:

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

Principal Office Address:

2655 LEJEUNE ROAD
CORAL GABLES, FL 33134

Mailing Address:

2655 LEJEUNE ROAD
CORAL GABLES, FL 33134

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

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

BRIAN ROSS, ESQ.

Name

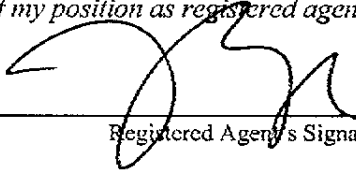
3018 U.S. HIGHWAY 301 N., SUITE 900

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

TAMPA FL 33619

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

(CONTINUED)

FILED
03 AUG 29 AM 8:00
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

TODD KESSELMAN

12300 WILSHIRE BLVD., SUITE 200
LOS ANGELES, CA 90025

MGR

HOLLYE DAVIDSON

DAVID KERN PETELER
CORAL GABLES, FL 33134

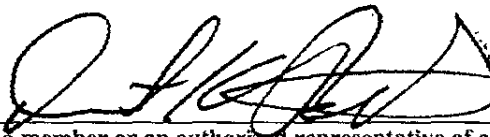
MGR

HOLLYE DAVIDSON

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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.)

DAVID KERN PETELER

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)

SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

03 AUG 29 AM 8:00

FILED