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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:				
	Name Availability				
	Document Examiner				
	Updater Office Use Only				
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į	Acknowledgement DCC				
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## TRANSMITTAL LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: KS Building Group LLC	
(Name of Limited Liability Company)	_
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Robert A. Shutok	
(Name of Person)	
KS Building Group LLC	
(Firm/Company)	
P.O. Box 367411	
(Address)	
Bonita Springs, FL 34136	_3
(City/State and Zip Code)	<b>9</b>
For further information concerning this matter, please call:	SECRETATION OF JAN 23
Robert A. Shutok at ( 239 ) 947-3500	<u> </u>
(Name of Person) (Area Code & Daytime Telephone Number)	<u></u>
	<b>.</b>

STREET ADDRESS: Registration Section
Division of Corporations
409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:				
KS Building Group LLC				
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
KS Building Group LLC	KS Building Group LLC			
24900 Divot Dr.	P.O. Box 367411			
Bonita Springs, FL 34135	Bonita Springs, FL 34136			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  The name and the Florida street address of the registered agent are:  Howard Warren Krass  Name  24900 Divot Dr.  Florida street address (P.O. Box NOT acceptable)				
•				
Bonita Springs,	FLORIDA 34135			
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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MGRM	Howard Warren Krass		
	24900 Divot Drive	***	
	Bonita Springs, Florida 34135	_ _	
MGRM	Robert Alan Shutok		
	24900 Divot Drive	_	
	Bonita Springs, Florida 34135		
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(Use attachment if necessary)		PE	÷ ,
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		<b>:</b> 02	3 34 44-4
NOTE: An additional article must be	added if an effective date is requested.	10	SHELLY
REQUIRED SIGNATURE:			
Robert alon Shitte	•		
	uthorized representative of a member.		
An accordance with section 609	.408(3), Florida Statutes, the execution		
of this document constitutes an a	iffirmation under the penalties of perjury		
that the facts stated herein are tr			

<u>Filing Fees:</u> \$100.00 Filing Fee for Articles of Organization

Robert Alan Shutok

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee