Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : HOLLAND & KNIGHT Account Number : 075350000340 : (407)425-8500 Phone

Fax Number

: {407}244-5288

LIMITED LIABILITY COMPANY

K&B Associates XII, LLC

Certificate of Status Certified Copy Page Count Estimated Charge

Electronic Filing Menu

Corporate Filing

Public Access Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: K&B Associates XII, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 5728 Major Boulevard, Suite 601, Orlando, FL 32819

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

The name and the Florida street address of the registered agent are: Randall R. Hodge, 5728 Major Boulevard, Suite 601, Orlando, FL 32819

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.)

Randall R. Hodge

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) 04 FEB 17 PM 3: 54
SECRETARY OF STATE
TALLAHASSEF, FLORIN

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