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LD4-21277
CJL

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kenneth Thompson L.L.C.
(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:

Kenneth Thompson L.L.C.
(Name of Person)

Kenneth Thompson L.L.C.
(Firm/Company)

1414 Pincey Rd
(Address)

N. Ft. Myers FL 33903
(City/State and Zip Code)

For further information concerning this matter, please call:

Kenneth Thompson at (239) 822-4956
(Name of Person) (Area Code & Daytime Telephone Number)

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04 MAR 19 PM 12:48

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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:

Kenneth Thompson L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

1414 Piney Rd
N. Ft. Myers FL
33903

Mailing Address:

1414 Piney Rd
N. Ft. Myers FL
33903

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

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

Kenneth Thompson
Name

1414 Piney Rd
Florida street address (P.O. Box NOT acceptable)

N. Ft. Myers FLORIDA 33903
City, State, and Zip

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JAN 10 PM 12:46
CLERK OF COURT
TALLAHASSEE, FLORIDA

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..

Kenneth Thompson
Registered Agent's Signature

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

Kenneth Thompson
1414 Pincy Rd.
N. Ft. Myers FL 33903

(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.)

Kenneth Thompson
Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CHIEF OF BUREAU
11 PM 12:46

FILED

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)