

W4000021381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

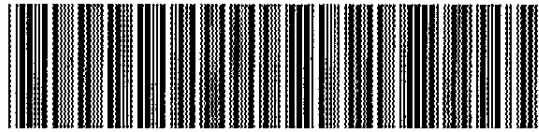
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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KKR Co., 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:

Christina R Santana  
(Name of Person)

KKR Co., LLC  
(Firm/Company)

2718 Treymore Drive  
(Address)

Orlando, FL 32825  
(City/State and Zip Code)

For further information concerning this matter, please call:

Christina R Santana at ( 407 ) 383-9316  
(Name of Person) (Area Code & Daytime Telephone Number)

**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:

KKR Co., LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

2718 Treymore Drive

Orlando, FL 32825

**Mailing Address:**

2718 Treymore Drive

Orlando, FL 32825

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

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

Christina R Santana

Name

2718 Treymore Drive

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

Orlando,

FLORIDA 32825

City, State, and Zip

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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..*

Christina R Santana

Registered Agent's Signature

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

**"MGRM" = Managing Member**

**Name and Address:**

**MGRM**

**Christina R Santana**

**2718 Treymore Drive**

Orlando, FL 32825

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

NATURE: Christina Santana

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.)

**Christina R Santana**

Typed or printed name of signee

**\$ 5.00 Certificate of Status (Optional)**