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(Requestor's Name)	
(Address)	2000353
(Address)	200000
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	05/04/04010
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Km Realty LLC	OF THE PARTY OF STATE
	Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File
	Fictitious Name File Trade/Service Mark Merger File
	Art. of Amend. File
	Cert. Copy Photo Copy Certificate of Good Standing
	Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search
Signature	Fictitious Search Fictitious Owner Search Vehicle Search
Requested by: 514 Name Date Time	Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval
Walk-In Will Pick Up	Courier

ARTICLES OF ORGANIZATION FOR FLORI	DA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	KM Realther
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Delvay Bruch Tloydor, 33184	Same
ARTICLE III - Registered Agent, Registered Office	e, & Registered Agent's Signature:
The name and the Florida street address of the register	
Kehneth Met	n, ck
Name	1
150 Linton	3/vd. Suite 320
Florida street address (P.O. Box N	OT acceptable)
City, State, and Zip	33484
City, State, and Zip	
Having heen named as registered agent and to accept so liability company at the place designated in this certifical registered agent and agree to act in this capacity. I further statutes relating to the proper and complete performance accept the obligations of my position as registered agent.	ate, I hereby accept the appointment as ther agree to comply with the provisions of all the of my duties, and I am familiar with and
	
Registered Agent's Signa	time

(CONTINUED)

	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:		
SOLE		Kenneth Metnick alis son		
· }	Managing Mewher :	Fenneth Metanck 3/Ud. Sur 5150 Linton 3/Ud. Sur Delvay Beard, Florida		
**				
	(Use attachment if necessary)			
	NOTE: An additional article must be added if an effective date is requested.			
	REQUIRED SIGNATURE:			
	•	Cic. at stud		
	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 Methick		
	T	yped 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)		

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