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| (Requestor's Name)                      |  |  |  |
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| (Address)                               |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |
|   |  |  |  |
| (Business Entity Name)                  |  |  |  |
|   |  |  |  |
| (Document Number)                       |  |  |  |
|   |  |  |  |
| Certified Copies Certificates of Status |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |
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## TRANSMITTAL LETTER

TO: R

Registration Section Division of Corporations

SUBJECT: KCH Tay Certificates - 7 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:

|                           | Rathteen CHurdle      |  |  |  |  |
|---------------------------|-----------------------|--|--|--|--|
|                           | (Name of Person)      |  |  |  |  |
|                           | Hurdle Enterprises    |  |  |  |  |
| (Firm/Company)            |                       |  |  |  |  |
|                           | 1616 Levington Ane.   |  |  |  |  |
| (Address)                 |                       |  |  |  |  |
|                           | Mansfield, ohio 44907 |  |  |  |  |
| (City/State and Zip Code) |                       |  |  |  |  |

For further information concerning this matter, please call:

Consider the Consideration (Name of Person) at (800) 962-069-7 (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

Tay Certificates - 7 LLC

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

Mailing Address:

FLORIDA 34108

**ARTICLE I - Name:** 

**ARTICLE II - Address:** 

Principal Office Address:

The name of the Limited Liability Company is:

| 8960 Bay Colony Dr. #502<br>Naples, FL 34108  | 8960 BayColonyldr. #502<br>Naples, FL 34108 |
|---|---|
| ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registered |   |
| Kothleen C. Hu<br>Name  | يتي يتي الم                                 |
| 8960 Bay 6/one<br>Florida street address (P.O. Box N  | OT acceptable)                              |

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

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..

| ARTICLE IV- Manager(s) or Manager of the name and address of each Manager of |  |  |
|--|--|--|
| Title: "MGR" = Manager "MGRM" = Managing Member                              | Name and Address:  |  |
| MGR  | Rathteen C. Hurdle<br>8960 Bay Coloney Dr.<br>Naples, FL 34108 | ノ<br><u>_</u> #S0マ<br>_  |
|  |  | _<br>_<br>_  |
|  |  | <del></del><br>  |
| (Use attachment if necessary)  |  | _<br>_<br>_  |
| NOTE: An additional article must be  | added if an effective date is requested.                       |  |
| REQUIRED SIGNATURE:  |  |  |
| Kathleen C.  | Hurdle   |  |
|  | uthorized representative of a member.                          | 340 -2   |
| of this document constitutes an a that the facts stated herein are true.     | C. Hurdle  | SSERVITATION OF THE PROPERTY O |
| Typed or pri   | nted 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)