

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 SEP 30 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L04000060376**

1. Limited Liability Company's Name

KCK Investments LLC

000161050410
09/25/09--01044--007 **138.75

CR2E041 (10/08)

2. Principal Office Address - No P.O. Box #

3776 E. Miller's Bridge Rd

Suite, Apt. #, etc.

3. Mailing Office Address

3776 E. Miller's Bridge Rd

Suite, Apt. #, etc.

City & State

Tallahassee, FL

Zip

32312

Country

USA

City & State

Tallahassee, FL

Zip

32312

Country

USA

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

8/13/04

6. FEI Number

201505421

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Kent Knisley

Street Address (P.O. Box Number is Not Acceptable)

3776 E. Miller's Bridge Rd

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32312

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date

9/24/09

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Mgrm	Kent Knisley	3776 E Miller's Bridge Rd	Tallahassee, FL 32312

000161050410

10/01/09--01006--002 **277.50

REINSTATEMENT

2007-09

4.16.25

S. HAWKES

SEP 28 2009

EXAMINER

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Managing Member/Manager

[Signature]
Typed or printed name of signing Managing Member/Manager

Date

9/24/09

Daytime Phone #

850 5455318



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 28, 2009

KCK INVESTMENTS LLC
3776 E MILLERS BRIDGE RD
TALLAHASSEE, FL 32312

SUBJECT: KCK INVESTMENTS LLC
Ref. Number: L04000060376

We have received your document for KCK INVESTMENTS LLC and your check(s) totaling \$138.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2007 through 2009; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$416.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 909A00031540