

2040000 67331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

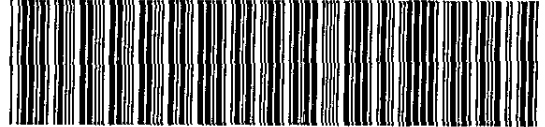
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

9/14
cust



800040818348

09/13/04--01055--019 **160.00

FILED
04 SEP 13 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 9, 2004

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

Gentlemen:

Enclosed please find an application for the establishment (Articles of Organization) of
my new Limited Liability Company. The name of the company will be:

PD Kismet, LLC

Please feel free to contact me with any questions or if I am missing information.

Thank you for your assistance.

Sincerely,



Don A. Schnell
1711 SE 10th Avenue
Cape Coral, FL. 33990
239-565-7473

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 SEP 13 PM 12:41

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PD Kismet, LLC

ARTICLE II - Address:

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

1711 SE 10TH AVENUE
CAPE CORAL, FL. 33990

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

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

DON SCHNELL

Name

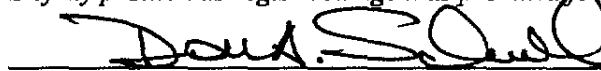
1711 SE 10TH AVENUE

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

CAPE CORAL FL 33990

City, State, and Zip

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.



Registered Agent's Signature

(An additional article must be added if an effective date is requested)



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.)

DON SCHNELL

Typed 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)

FILED

SEP 13 PM 12:41

CLERK OF CIRCUIT COURT
FLORIDA