

FROM :  
Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 205-0383

From:  
Account Name : LORN LEITMAN, C.P.A.  
Account Number : T19980000088  
Phone : (305) 279-8943  
Fax Number : (305) 271-4421

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DIVISION OF CORPORATIONS

**LIMITED LIABILITY COMPANY**

**KB Oceanside Holdings, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

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**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name**

The name of the Limited Liability Company is KB Oceanside Holdings, LLC

**ARTICLE II – Address**

The mailing address and street address of the principal office of Highland Advisors, LLC is:

KB Oceanside Holdings, LLC  
7700 N. Kendall Dr., #405  
Miami, FL 33156

**ARTICLE III – Registered Agent, Office & Agent's Signature**

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

Lorn Leitman  
7700 N. Kendall Dr., #405  
Miami, FL 33156

*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, F.S.*

  
\_\_\_\_\_  
Registered Agent's Signature

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**ARTICLE IV – Management (check box if applicable)**

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member

Lorn Leitman  
\_\_\_\_\_  
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)

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