

L050000 61954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

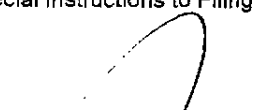
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A large, stylized handwritten signature, possibly reading 'B/K', is written in black ink across the middle of the page.

Office Use Only



900056335669

$\sigma_{\text{eff}} = \frac{\sigma}{1 + \beta} = 0.67$ at $\beta = 0.5$. (1)

FILED
05 JUN 22 PM 2:00
SECURITY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
JAN 2 1964
FBI - TAMPA

FILED
05 JUN 22 PM 2:08
SECOND DISTRICT
TALLAHASSEE, FLORIDA

**LAZARUS
CORPORATE FILING SERVICE**

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. K C 2 KREATIONS, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☐ Mail out

☐ Will wait

☐ Photocopy

☒ Certified Copy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☒ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

K C 2 K creations,Llc

ARTICLE II – Address:

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

15859 N.W 4th Street Pembroke Pines Florida 33028

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

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

Amelia Marilyn Gonzalez

Name

15859 N.W 4th Street

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

Pembroke Pines Florida 33028

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, F.S.

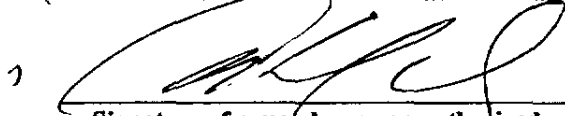


Registered Agent's Signature

Article IV – Management (Check if applicable)

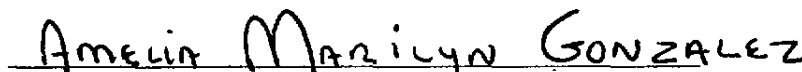
☒ The Limited Liability Company is to be managed by one manager and is, therefore, a manager- managed company.

(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)



Typed or printed name of signer

FILED
05 JUN 22 PM 2:08
SECURITY OF STATE
TALLAHASSEE, FLORIDA