L05000062872

(Re	equestor's Name)		
(Ac	idress)		
(Ac	ldress)		
(Cit	ty/State/Zip/Phone	= #)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
		Ì	
D'O#6 11- 0.1			



700056193697

06/20/05--01075--025 **155.00

FILED

1005 JUN 20 P 12: 52

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Kingclom Mariagrae TI, L-CC. (Name of Limited Limbility Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following: 1110/line Person Person
Kingdom Martgage III LLC (Firm/Company)
2211 Driture St, Suite 207
1257 Palm Beach, FL 33401 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S125.00 Filing Fee Scrifficate of Status S155.00 Filing Fee Scrifficate of Status Stat
OFF N

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

ARTICLE I - Name:

The name of the Limited Liability Company is:
Kingdom Martgage III, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
224 Dehing St #201 105F Pilm Board Fr 33401 Wort Pilmy Bch, Fr 3342
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Florida street address (P.O. Box NOT acceptable) 128 Ruling BL FL 3340 City, State, and Zip
Having been named as registered agent and to accept service of process for the shove stated limited liability company at the place designated in this certificate, I hereby accept the appointmentage 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 appendic with and accept the obligations of my position as registered agent as provided for in Chapter 608, It is

(CONTINUED)

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:		
"MGR" = Manager "MGRM" = Managing Member MC /C .	Alexane Penns	7, 207 FL33401	
(Use attachment if necessary) NOTE: An additional article must	be added if an effective date i	s requested.	
REQUIRED SIGNATURE:	Vernet-		
(In accordance with sec of this document consti that the facts stated h	0 ' /	execution es of perjury ASE 285	
Filing Fees: \$125.00 Filing Fee for Articles of Organ	ped or printed name of signee	JUN 20 P RETARY OF S AMASSEE, FL	
of Registered Agent \$ 30.00 Certified Copy (Optional)	mzacion and Designation) IZ: 52	

\$ 5.00 Certificate of Status (Optional)