

LOS000117188

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H05000286031 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

RECEIVED

05 DEC 15 AM 7:43

DIVISION OF CORPORATION

LIMITED LIABILITY AMENDMENT

BK MANAGEMENT LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 DEC 15 AM 8:16

FILED

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing

Public Access Help

Justin T. Reed
BlumbergExcelsior Corporate Services, Inc.
62 White Street
New York, NY 10013

LOS-117188
H05000286031 3

H05000286031 3

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
BK Management LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
Article II. Principle Office Address and Mailing Address are incorrect.

ARTICLE II - The street and mailing address of the principle office of the
Limited Liability Company is:

1113 Southeast 47th Terrace, Suite #4, Cape Coral, FL 33904

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: December 15, 2005

Signature of a member or authorized representative of a member

Rodo Kleber, Member

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

CR270052 (02/05)

BlumbergExcelsior Corporate Services, Inc.
62 White Street
New York, NY 10013

H05000286031 3

FILED

2005 DEC 15 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BK Management LLC**ARTICLE II - Address:**

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

Principal Office Address:18773 Panther Paw Court
Fort Myers, FL 33908**Mailing Address:**18773 Panther Paw Court
Fort Myers, FL 33908**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Bodo Kieber

Name

18773 Panther Paw CourtFlorida street address (P.O. Box NOT acceptable)Fort Myers, FL 33908

FL

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 603, F.S.



Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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

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

Title:


"MGR" - Manager

"MGRM" - Managing Member

Name and Address:MGRMBodo Kleber16773 Panther Paw CourtFort Myers, FL 33908

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:
Signature of a member or an authorized representative of a member.

(In accordance with section 605.405(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Justin T. Reed, Organizer

Typed or printed name of signer

Filing Fees:**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent****\$ 30.00 Certified Copy (Optional)****\$ 5.00 Certificate of Status (Optional)**