# 5000/1955/

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## **COVER LETTER**

TO: Registration Se Division of Co						
SUBJECT: KING'S	FOREST, LLC	d Liability Compa	ıny)			
	`		2,			
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing	<u>,</u>			
Please return all corresp	ondence concerning this matte	er to the following	:			
CALVIN B	ABCOCK					
	(	Name of Person)				_
KING'S FC	REST, LLC					
		(Firm/Company)				
9200 S. D	adeland Blvd #103					
		(Address)				_
Miami, Flo	orida 33156					
	(City	/State and Zip Code	)			
For further information	concerning this matter, please	call:			SEI TALI	2005
CALVIN BABCOCK		at ( 305	599-2780	0	AH/	IIIS DEC
(Name of Person)			& Daytime Te	elephone Number)	ASSE ASSE	2
Enclosed is a check fo	or the following amount:				OF S	PK
\$125.00 Filing Fee \$130.00 Filing F Certificate of Status		\$155.00 Fit Certified Copy (additional copy i	/	\$160.00 Fi Certificate of Certified Cop (additional copy	Status a	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Board Exe	ourier Address on Section of Corporation uilding cutive Center ee, FL 32301	1\$		

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
KING'S FOREST, LLC
Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

# **ARTICLE II - Address:**The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

9200 S. Dadeland Blvd #103

9200 S. Dadeland Blvd #103

9200 S. Dadeland Blvd #103		9200 S. Dadeland Blvd #103			
Miami, Florida 33156		Miami, Florida 33156			

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or articles business entity with an active Florida registration.)

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

	Name
9200 S. Dad	ieland Blvd #103
	Florida street address (P.O. Box NOT acceptable)
Miami,	ят 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 (REQUIRED)

(CONTINUED)
Page 1 of 2

12 1005

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	-
"MGR" = Manager		
"MGRM" = Managing Member		
MGR	CALVIN BABCOCK	
	9200 S. Dadeiand Blvd #103	
	Miami, Florida 33156	
MGRM	J. ED BELL	
MOTUV	9200 S. Dadeland Blvd #103	•
	Miami, Florida 33156	-
	·	
		-
(Use attachment if necessary)		
,	TAS 2	3
ARTICLE V: Effective date, if other than the d	ate of filing: DECEMBER 6, 2005 (OFTIONAL	₹) •
(If an effective date is listed, the date must be to or 90 days after the date of filing.)	specific and cannot be more than five business days	prior
to or 50 days after the date of fining.)	SSE SSE	
	in a	
<b>REQUIRED SIGNATURE:</b>	FLS	
	OR SE	6
Mile M	10/ 24	
Signature of a member	or an authorized representative of a member.	
(In accordance with section of this document constituent that the facts stated here.)	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)	
CALVIN BABCOCK		
Турс	ed or printed name of signee	•

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)