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COVER LETTER

TO: Registration S Division of Co		• .	
SUBJECT:K	L Enterprise (Name of Limite	-s LLC	E E
	(Name of Limite	d Liability Company)	
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.	E. F. Con
	pondence concerning this matte		(O)
	Teffrey La	igeman	
	_ (Nafne of Person)	
KL	Enteronse	5 LLC	
		Firm/Company)	
	4	(Address)	·
Jack	1 Forest 1 usenville f	FL 32. (State and Zip Code)	257
	(City	State and Zip Code)	
For further information	concerning this matter, please	call:	
Jeffry	lagunes	at (904 739) (Area Code & Daytime Te	6943
(Name	e of Pergon)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	$\Gamma \cap \Gamma$	F	I _ N	Jama.
ALL	IVL	ar i		iaine:

The name of the Limited Liability Company is:

KL Enterprises, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,"

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

% Tanton & Company	% Tanton & Company
37 West 57th Street, 5th floor	37 West 57th Street, 5th Floor
New York, NY 10019	New York, NY 10019

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 another business entity with an active Florida registration.)

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

Registered Age	ents Legal Services, inc.
	Name
1333 North D	uvall
Flo	rida street address (P.O. Box NOT acceptable)
Tallahassee	_{FL} 32303
	City, State, and Zin

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

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

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

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Jeffry Lagerra III III Jachen VINE Fr 32257
	e date of filing: (OPTIONAL) se specific and cannot be more than five business days p
FICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE:	e date of filing: (OPTIONAL) se specific and cannot be more than five business days p
FICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document copst that the facis stated here.	

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

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