Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporation	ns		
SUBJECT:	(Name of Limited	Una, L. L. L. Liability Company)	.C
The enclosed Articles of Organi	zation and fee(s) are su	bmitted for filing.	
Please return all correspondence			TOR JAN 18 PM 4: 38
	Karah You	lame of Derson)	一
	K.K.Yo	Ouna, L.L.	38
	P.O. Bo	× 8346 (Address)	
	Jacksonu		3239
For further information concerni	ing this matter, please c	all:	
Karah You (Name of Person	Mg	at (904) 465 (Area Code & Daytime Tele	ephone Number)
Enclosed is a check for the fo	llowing amount:		
\$125.00 Filing Fee \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	30.00 Filing Fee & Cate 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)
	ng Address	Street/Courier Address	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 25, 2006

KARAH YOUNG K.K. YOUNG, L.L.C. P.O. BOX 8346 JACKSONVILLE, FL 32239

SUBJECT: K.K. YOUNG, L.L.C. Ref. Number: W06000003688



We have received your document for K.K. YOUNG, L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 18, 2006. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 706A00005356

Joey Bryan Document Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY	OMEANY
ARTICLE I - Name: The name of the Limited Liability Company is:	NI8
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.	PM 4: 38
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability	Company is:
Principal Office Address: Mailing Address:	
Jacksonville, FL. 32277 P.O. Box 8346 Jacksonville, FL. 32277 P.O. Box 8346	<u></u>
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signa (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or business entity with an active Florida registration.)	ature: another
The name and the Florida street address of the registered agent are: Karah K. Young Name	EFFECTIVE DAT
7925 Merrill Rol Ste 2100	,

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 Manager and address of each Manager	naging Member(s): ger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Karah K. Young P.O. Box 8346 Jackson VI (1e, Fl. 32) 39
MGRM	Daniel Fadool 4501 SAM SIMEON Austin, Tex. 78749
MGRM	Terri Morris 11247 Jan Jose Blud #190 JACKSON UI 112, FC. 32223
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)	e date of filing: Jan 18 th 2006 (OPTIONAL) De specific and cannot be more than five business days prio
REQUIRED SIGNATURE:	and I m
Signature of a memb	per or an authorized representative of a member.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

(In accordance with section 608.408(3) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

ARAH K. Young Typed or printed name of signee