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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	<i>≠</i>)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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ON SERVICE COMPARY.	
ACCOUNT NO. : 072100000032	
REFERENCE: 859154 4305390	
AUTHORIZATION: Spelle Man	
COST LIMIT : \$ 125.00	
ORDER DATE : February 8, 2006	
ORDER TIME : 3:49 PM	
ORDER NO. : 859154-005	
CUSTOMER NO: 4305390	是是对
DOMESTIC FILING	解 建
NAME: K & G PROPERTY INVESTMENTS, LLC	ELORIDA FLORIDA
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Amanda Haddan - EXT. 2955	

EXAMINER'S INITIALS:

*

PANYS TO

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY C

ARTICLE I - Name:

The name of the Limited Liability Company is:

K & G Property Investments 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:	Mauing Address:
5676 Corporate Way	5676 Corporate Way
West Palm Beach, FL 33407	West Palm Beach, FL 33407

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 emity with an active Florida registration.)

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

Keith Klimezky	<u> </u>
	Name
5676 Corporate Way	
Florida	street address (P.O. Box NOT acceptable)
West Palm Beach	FL 33407
City	y, 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 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 1333 N. DUVAL STREET, TALLAHASSEE, FL 32303 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

02-08-06

NAME:

FLASH ON SITE, LLC

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

COST:

\$125 + \$5 + \$30= \$160

RETURN: GOOD STANDING AND CERTIFIED COPY

ACCOUNT: FCA0000000015

AUTHORIZATION: ABBIE/PAUL HODGE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Jurisdiction under the law of which foreign limited liability company is organized) applicable) 2005 (Duration: Year limited liability company will exist or "perpetual") (Date of Organization) 2005 (Date first transacted business in Florida, if prior to registration.)
(See sections 608,501 & 608,502 F.S. to determine penalty liability) son (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having outday of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the contificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Signature of a member or an authorized representative of a member. (In accordance with section 602.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:
Flash on Site, L.L.C.
2. The name and the Florida street address of the registered agent and office are:
Kris Flasher Big
3501 Jacks on Street Suito 10' Florida Street Address (P.O. Box NOT ACCEPTABLE)
Hollywood FL Flo 33021

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, Florida Statutes.

King Franker

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

Page 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FLASH-ON-SITE LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE NINETEENTH DAY OF JANUARY, A.D. 2006.





Darriet Smith Windson Secretary of State

AUTHENTICATION: 4460269

DATE: 01-19-06

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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" = Manag		
"MGRM" = Man	aging Member	E 8
MGRM		Name and Address: Keith Klimezky 5676 Cotporate Way
	5676 Corporate Way	
		West Palm Beach, FL 33407
		· nº
MGRM		Harris Goodman
	<u>-</u>	1791 Brighton Lakes Blvd.
		Boymon Beach, FL 33436
(Tise attachment	if necessor)	
(Use attachment CLE V: Effective effective date is lis 90 days after the d	date, if other than the	date of filing: (OPTIONAL) e specific and cannot be more than five business days p
CLE V: Effective effective date is lis	date, if other than the sted, the date must be ate of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days p
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CLE V: Effective effective date is lis 90 days after the de	date, if other than the sted, the date must be ate of filing.) GNATURE: Signature of a member of a member of this document constitution.	e specific and cannot be more than five business days per or an authorized representative of a member. Tion 608.408(3), Florida Statutes, the execution intuities an affirmation under the penalties of perjury
CLE V: Effective effective date is lis 90 days after the de	date, if other than the sted, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with sec	e specific and cannot be more than five business days per or an authorized representative of a member. Tion 608.408(3), Florida Statutes, the execution intuities an affirmation under the penalties of perjury
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CLE V: Effective effective date is lis 90 days after the de	date, if other than the sted, the date must be ate of filing.) GNATURE: Signature of a member of this document constitute the facts stated here.	e specific and cannot be more than five business days particle and cannot be more than five business days particle and cannot be more than five business days particle an authorized representative of a member. Stion 608.408(3), Florida Statutes, the execution intuities an affirmation under the penalties of perjury terein are true.

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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