

L060000015565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

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2006 FEB 13 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 FEB 13 PM 12:35

DIVISION OF REGISTRATION

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

LLK, LLC.

Signature _____

Requested by: AW

Name _____

Date 2/13

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File

____ LTD Partnership File

____ Foreign Corp. File

☒ L.C. File

____ Fictitious Name File

____ Trade/Service Mark

____ Merger File

____ Art. of Amend. File

____ RA Resignation

____ Dissolution / Withdrawal

____ Annual Report / Reinstatement

☒ Cert. Copy

____ Photo Copy

☒ Certificate of Good Standing

____ Certificate of Status

____ Certificate of Fictitious Name

____ Corp Record Search

____ Officer Search

____ Fictitious Search

____ Fictitious Owner Search

____ Vehicle Search

____ Driving Record

____ UCC 1 or 3 File

____ UCC 11 Search

____ UCC 11 Retrieval

____ Courier

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: LLK, LLC.

ARTICLE II - Address:

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

301 Sweet Bay Circle, Jupiter, FL 33458

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

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

F. Larry Robinette
Name
301 Sweet Bay Circle
Florida street address (P.O. Box NOT acceptable)
Jupiter FL 33458
City, State, and Zip

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TALLAHASSEE, FLORIDA

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.

F. Larry Robinette
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

[Signature]
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Landon P. Miller
Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)