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(Re	questor's Name)	<u>-</u>
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: K.A.T.T. PROPERTY HOLDINGS, LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kenneth F. Talovich

(Name of Person)

K.A.T.T. PROPERTY

(Firm/Company)

2244 S. Federal Hwy, Ste #153

Stuart, F

(City/State and Zip Code)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

S125.00 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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COM

ARTICLE I - Name:

The name of the Limited Liability Company is:

K.A.T.T. PROPERTY HOLDINGS, 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:
2244 S. Federal Hwy, Ste. #153 Stuart, FL 34994	2244 S. Federal Hwy, Ste. #153 Stuart, FL 34994
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another

Doug Owens Name

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

2244 S. Federal Hwy, Ste. #153

Florida street address (P.O. Box NOT acceptable)

Stuart FL 34994 City, 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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address: Kenneth F. Talovich 2244 S. Federal Hwy Ste #153
MGR	Kenneth F. Talovich 2244 S. Federal Hwy, Ste. #153 Stuart, FL 34994
MGRM	Doug Owens 2244 S. Federal Hwy, Ste. #153 Stuart, FL 34994
(Use attachment if necessary) LE V: Effective date, if other than	the date of filing: . (OPTIO
LE V: Effective date, if other than fective date is listed, the date mus days after the date of filing.)	the date of filing: (OPTIO of the specific and cannot be more than five business
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LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a menute of this document contents.	st be specific and cannot be more than five business
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a menute of this document contents.	mber or an authorized representative of a member. In section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury teed herein are true.)