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M. HODGE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 45 KPS 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 J LUDKA (Name of Person)
(Name of Person) 45KPS LLC (Firm/Company)
102 MORRIS LANE (Address)
(Address) KEY LARGO FL. 33037 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (305) 3945970 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\text{\$125.00 Filing Fee} \text{\$\begin{array}{ c c c c c c c c c c c c c c c c c c c
(additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
HSKPS 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:
KENNEIH I LUDKA 102 MORRIS LANE KEY LARGO FLORIDA 33037
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:
KENNETH J LUDKA Name 102 MORRIS LANE Florida street address (P.O. Box NOT acceptable) Key LARGO FL 33037 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

Title:		Name and Address:	
"MGR" = Mana	ager		
	maging Member		
MGRM		Kenneth Ludka	•
		102 MOrris Lanne	
	٠.	Key Largo, FL.3037	
MGR	`	David Lougheed	
	· · · · · · · · · · · · · · · · · · ·	RR 4 Baddeck	
	,	Nova Scotia, BO1BO, Canada	
MGR		Otis Lougheed	
		P.O. Box 866	
		Great Barrington, MA, 01230	
MGR		Scott Cappel	
		49 Pearl Street	
		Great Barrington, MA. 01230	
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LE V: Effective fective date is li days after the d	isted, the date must be late of filing.) IGNATURE: Kenneth Lucka Signature of a member	specific and cannot be more than five bush A function of a member. Ion 608.408(3), Florida Statutes, the execution ites an affirmation under the penalties of perjury	

Filing Peek

5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
5 30.00 Certified Copy (Optional)
5 5.00 Certificate of Status (Optional)