

L060000060635

2006 JUN -1 P 1:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

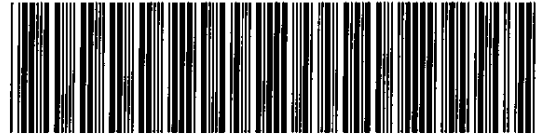
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

AL1

Office Use Only



600075943146

06/07/06--01026--004 **130.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kaypaxloluk, LLC
(Name of Limited Liability Company)

FILED
2006 JUN -7 P 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

C. David Tangora, Esq.
(Name of Person)

C. DAVID TANGORA, P.A.
(Firm/Company)

200 SE 18th Court
(Address)

Fort Lauderdale, Florida 33316
(City/State and Zip Code)

For further information concerning this matter, please call:

David Tangora at (954) 779-1005
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
KAYPAXLOLUK, LLC

2006 JUN -7 P 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I -Name:

The name of the Limited Liability Company is:

Kaypaxloluk, LLC

ARTICLE II - Address:

Principal Office Address:

5361 Lancelot Lane
Davie, Florida 33331

Mailing Address:

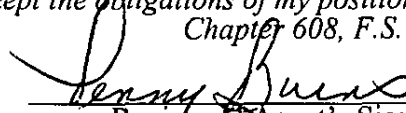
5361 Lancelot Lane
Davie, Florida 33331

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

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

Paulette Penny Burns
5361 Lancelot Lane
Davie, Florida 33331

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

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

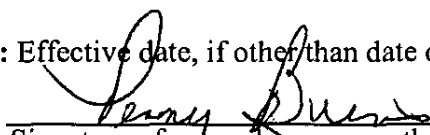
Title:

MGRM

Name and Address:

Paulette Penny Burns
5361 Lancelot Lane
Davie, Florida 33331

ARTICLE V: Effective date, if other than date of filing: Date of Filing



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

Paulette Penny Burns