

LOW000077131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

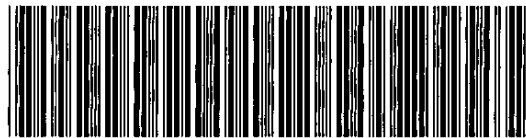
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WAIT

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(Business Entity Name)

(Document Number)



200076960302

07/13/06--01035--007 **155.00

File
as of
7/13/06

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

EFFECTIVE DATE
7/14/06

Office Use Only

W06-3/650

KRS CONSTRUCTION LLC
16314 GOLF COURSE RD.
PARRISH, FL. 34219
HOME: 941-776-1611
CELL: 941-737-3687

JULY 10, 2006

REGISTRATION SECTION
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL. 32314

TO WHOM IT MAY CONCERN,

RE: FLORIDA LIMITED LIABILITY COMPANY

Please accept my application for a limited liability company. I have included the required forms. Please process my application as promptly as possible. Thank you in advance for your help with this matter.

Respect fully,

Kenneth R. Shewbridge
KENNETH R. SHEWBRIDGE
PRESIDENT KRS CONSTRUCTION LLC.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 17, 2006

KENNETH R. SHEWBRIDGE
16314 GOLF COURSE RD.
PARRISH, FL 34219

SUBJECT: KRS CONSTRUCTION LLC
Ref. Number: W06000031650

We have received your document for KRS CONSTRUCTION LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on July 13, 2006. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6917.

Gretchen Harvey
Document Specialist Supervisor

Letter Number: 206A00045664

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KRS CONSTRUCTION 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:

16314 GOLF COURSE RD
PARRISH, FL 34219

Mailing Address:

16314 GOLF COURSE RD.
PARRISH, FL 34219

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 R. SHEWBRIDGE
Name
16314 GOLF COURSE RD
Florida street address (P.O. Box **NOT** acceptable)
PARRISH FL 34219
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..

KRS Shewbridge
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

KENNETH R. SHEWBRIDGE
16314 GOLF COURSE RD.
PARRISH, FL 34219

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JULY 19, 2006

(OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

K. R. Shewbridge
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.)

KENNETH R. SHEWBRIDGE

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation ✓
of Registered Agent

\$ 30.00 Certified Copy (Optional) ✓

\$ 5.00 Certificate of Status (Optional)