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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

KNOTHEAD FOUNDATION, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

KNOTHEAD FOUNDATION, 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:22 TANGLEWOOD CIRCLE
FT. WALTON BEACH, FL 32547**Mailing Address:**SAME AS PRINCIPAL OFFICE**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:

JOHN S. KOVAR

Name

22 TANGLEWOOD CIRCLEFlorida street address (P.O. Box **NOT** acceptable)FT. WALTON BEACH FL 32547

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..

X


Registered Agent's Signature (REQUIRED)BlumbergExcelsior
62 White Street
New York, NY 10013(CONTINUED)
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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:MGRM

PEANUTTY HOLDING COMPANY LIMITED PARTNERSHIP

22 TANGLEWOOD CIRCLE

FT. WALTON BEACH, FL 32547

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____, (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 SIGNATUREX 

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

(In accordance with section 605.000(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalty of perjury that the facts stated herein are true.)

PEANUTTY HOLDING COMPANY LIMITED PARTNERSHIP

Typed or printed name of signer

FILED FOR:IN 20.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

1) 20.00 Certified Copy (Optional)

2) 2.00 Certificate of Status (Optional)

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