L060000 98314

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000246321 3)))



H080802453213ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : WARD, DAMON & POSNER, P.A.

Account Number : 072262000447 Phone : (561)842-3000 Pax Number : (561)842-3526

FLORIDA/FOREIGN LIMITED LIABILITY CO.

KD DeSoto, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

SECRETALITY FLORIDA

MECELVED

06 OCT -6 PM 3: 36

NVIS.ON OF CORPORATE

Menn

Corporate Filing Menu

Help

Fax Audit No.: H06000246321 3

ARTICLES OF ORGANIZATION OF ICD DESOTO, LLC

THE UNDERSIGNED, pursuant to the Florida Limited Liability Company Act, adopts the following Articles of Organization for such Limited Liability Company:

ARTICLE I - NAME

The name of this Limited Liability Company is: KD DeSoto, LLC.

ARTICLE II - DURATION

The duration of this Limited Liability Company is perpetual.

ARTICLE III - PURPOSE

The purpose for which this Limited Liability Company is organized is to engage in any lawful act or activities for which limited liability companies may be organized under the laws of the State of Florida.

ARTICLE IV - MAILING ADDRESS OF LIMITED LIABILITY COMPANY

The mailing address of the business of this Limited Liability Company is 1831 SW 7th Avenue, Pompano Beach, Florida 33060 and the principal place of business of this Limited Liability Company is 1831 SW 7th Avenue, Pompano Beach, Florida 33060.

<u>ARTICLE V - INITIAL REGISTERED OFFICE AND REGISTERED AGENT</u>

The street address of this Limited Liability Company's initial registered office in Florida is 4420 Beacon Circle, Suite 100, West Palm Beach, Florida 33407 and the name of its initial registered agent at that address is Michael J Posner, Esq.

Prepared by: Michael J Posner, Esq. 4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407

Bar No: 525685 • Phone: 561/842-3000 Fax A

Fax Audit No.: H06000246321 3

Fax Audit No.: H06000246321 3

ARTICLE VI - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is therefore a manager - managed limited liability company. The names and addresses of the initial manager is as follows:

Karl Davis

1831 SW 7th Avenue, Pompano Beach, FL 33060

DATED this 6th day of October, 2006.

Michael J Posner, Authorized Representative (In accordance with Florida Statutes \$608.408(3) the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

STATE OF FLORIDA; COUNTY OF PALM BEACH) ss:

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Michael J Posner, to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid this 6th day of October, 2006.

Sign:

Notary Public

My Commission Expires:

CHRISTINA ZINGMAN
MY COMMISSION # DD 1945/3
EXPIRES: July 17, 2007
Sonded Titru Notary Picile Underwriters

Fax Audit No.: H06000246321 3

Prepared by: Michael J Posner, Esq. 4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407 Bar No: 525685 ◆ Phone: 561/842-3000

Fax Audit No.: H06000246321 3

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

ACKNOWLEDGMENT:

Having been named as registered agent and to accept service of process for KD DeSoto, LLC, at the initial registered office of the Limited Liability Company in this State designated in its Articles of Organization, 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, Florida Statutes.

Date: October 6, 2006.

Michael J Posner

4420 Beacon Circle

West Palm Beach, Florida 33407

FILED

06 OCT -6 AM 9: 27

SECRETAINE PLANTS

Fax Audit No.: H06000246321 3