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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy ☐ Mail out Certificate of Status ☐ Will wait Photocopy NEW FILINGS **AMENDMENTS** Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication ☐ Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)

## ARTICLES OF ORGANIZATION OF KOB LLC

#### ARTICLE I - NAME

The name of this limited liability company is KOB LLC (hereinafter "the Company")

#### **ARTICLE II - ADDRESS**

The mailing address and principal office is:

777 NW 155 Lane Miami, Florida 33169

# OTFEB-1 MII: 13 SECRETARY OF 3 OR IDA SECRETARY OF 3 OR IDA

#### **ARTICLE III: INITIAL REGISTERED OFFICE AND AGENT**

The name and mailing address of the initial registered office and the initial registered agent of the Company is :

Huguette Mortimer Dupont 777 NW 155 Lane Miami, Florida 33169

Having been named as registered agent and to accept service of process for the above state 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.

Huguette Mottimer Dupont-Registered Agent

#### <u>ARTICLES IV - MANAGEMENT</u>

The Company will be managed by one (1) manager and is, therefore a managermanaged company.

Huguette Mortimer Dupont 777 NW 155 Lane Miami, Florida 33169

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.

Huguette Mortimer Gupont, Authorized Representative

#### **ORGANIZER**

IN WITNESS WHE Organization this	REOF, I have made and subscribed these Articles of day of
	MARCELLE POIRIER
STATE OF FLORIDA	) ) SS
COUNTY OF DADE	)
	on to me to be the person described in and who executed these Articles r, and acknowledged before me that he executed the same freely and therein expressed.
sworn to a	AND SUBSCRIBED before me this 29 to of
Joseph My Cor	Public State of Florida B Ryan III mission DD445481 09/27/2009 NOTARY PUBLIC State of Florida at large

My commission expires: