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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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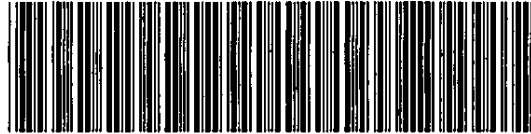
(Business Entity Name)

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DIVISION OF CORPORATIONS  
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ken Robinson, LLC  
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Kenneth D. Robinson  
(Name of Person)

(Firm/Company)

1146 Ceylon Court  
(Address)

Gulf Breeze, Florida 32563  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kenneth D. Robinson at ( 850 ) 776-5822  
(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

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# COHEN GARELICK & GLAZIER

A Professional Corporation of Attorneys at Law

June 28, 2007

Charles A. Cohen  
Robert A. Garelick\*\*  
Steven J. Glazier  
Richard L. Darst  
Steven M. Crell  
Edward F. Schrager\*\*  
Russell L. Jones  
Michael P. Bishop†  
Sandra L. Rothbaum  
Bradley H. Cohen  
Jill Goldenberg Schuman\*~  
Jeffrey A. Adams‡  
Heather Wysong Zaiger  
Joshua T. Robertson

Florida Department of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Ken Robinson, LLC

Dear Sir/Madam:

Enclosed please find an original and one copy of the Articles of Organization for Florida Limited Liability Company for filing, together with check for \$160.00 in payment of the filing fee, Certificate of Status and Certified Copy.

Please return the file stamped copy in the self addressed envelope that has been provided for your convenience.

Sincerely,

COHEN GARELICK & GLAZIER

*Jeffrey A. Adams*  
Jeffrey A. Adams

JAA/be  
Enclosure

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Ken Robinson, 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:

1146 Ceylon Court  
Gulf Breeze, FL 32563

#### Mailing Address:

1146 Ceylon Court  
Gulf Breeze, FL 32563

### 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 D. Robinson

Name

1146 Ceylon Court

Florida street address (P.O. Box **NOT** acceptable)

Gulf Breeze FL 32563

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..*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(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

Kenneth D. Robinson

1146 Ceylon Court

Gulf Breeze, FL 32563

\_\_\_\_\_

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(Use attachment if necessary)

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**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 SIGNATURE:**



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 D. Robinson

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)