## L0700074210

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiless Chury Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE
TALLAHASSEE, FLORID

## **COVER LETTER**

TO:	Registration Se Division of Co			
SUBJE	cct: Kennet	h J. Draper, P.L.		
		(Name of Limite	d Liability Company)	
The en	closed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
	Kenneth J.	Draper, Esq.		
		()	Name of Person)	
		(	Firm/Company)	
	2961 Selm	na Street		
			(Address)	
·	Jacksonvi	lle, FL 32205		
			State and Zip Code)	
For fur	ther information	concerning this matter, please	call:	
Kenn	eth J. Drape	er	at ( 904) 389-89	989
	(Name of Person)		(Area Code & Daytime	e Telephone Number)
Enclos	ed is a check fo	or 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 Add Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle



## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 6, 2007

KENNETH J. DRAPER ESQ. 2961 SELMA STREET JACKSONVILLE, FL 32205

SUBJECT: KENNETH J. DRAPER, P.L.

Ref. Number: W07000031957

We have received your document for KENNETH J. DRAPER, P.L. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

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) 245-6967.

Letter Number: 207A00043354

Leslie Sellers Document Specialist

Division of Corporations DO ROY 6397 Tallahaggae Florida 39314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
Kenneth J. Draper, P.L.	ny, "Limited Company" or their abbreviation "LLC," or "L.C.,")
(Must end with the words   Limited Liability Compar	ny, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2961 Selma Street	2961 Selma Street
Jacksonville, FL 32205	Jacksonville, FL 32205
business entity with an active Florida registration.)  The name and the Florida street address	of the registered agent are:
Kenneth J. Draper	N.
	Name
2961 Selma Street	
Florida s	street address (P.O. Box NOT acceptable)
Jacksonville	<sub>FL</sub> 32205
City	, State, and Zip
liability company at the place designate registered agent and agree to act in this control is the second se	and to accept service of process for the above stated limited sted in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and

ed all accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Ma "MGRM" = N	nager Managing Member	Name and Address:			
MGR		Kenneth J. Draper			
		2961 Selma Street		_	
		Jacksonville, FL 32205		<del>-</del> 	
				_	
				<del>-</del>	
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/[[ao a44aal					
•	ent if necessary)	he date of filing:	(OPTIC	ONAL)	
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ICLE V: Effection of the state	ive date, if other than the listed, the date must be date of filing.)  The spence of Signature:		usiness		9
ICLE V: Effection effective date is 90 days after the	ive date, if other than the listed, the date must be date of filing.)  SIGNATURE:  Signature of a mem	be specific and cannot be more than five be a purpose is the execution assistance an affirmation under the penalties of perjury	usiness		•
ICLE V: Effection effective date is 90 days after the	silve date, if other than the listed, the date must be date of filing.)  SIGNATURE:  Signature of a mem  (In accordance with of this document contact the facts stated Kenneth J. Draper	be specific and cannot be more than five be in purpose is the prevision of an authorized representative of a member section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury different are true.)	usiness		•
ICLE V: Effection effective date is 90 days after the	silve date, if other than the listed, the date must be date of filing.)  SIGNATURE:  Signature of a mem  (In accordance with of this document contact the facts stated Kenneth J. Draper	be specific and cannot be more than five be purpose is the prevision of an authorized representative of a member section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury different are true.)	usiness		9
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of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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