## 108000022614

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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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SECRETARY OF STATICAL DIVISION OF CORPORATION OF STATICAL OF THE STATICAL OF T

G. MCLEOD MAR - 4 2008

**EXAMINER** 

## COVER LETTER

Division of Corporations						
SUBJECT: Di	vine Design B	y KS				
SUBJECT,	(Name of Limited Liability Company)					
The enclosed Articles of	Organization and fee(s) are	submitted for filing.				
Please return all correspo	ondence concerning this mat	ter to the following:				
	Ja	son Sanon				
		(Name of Person)				
·						
		(Firm/Company)				
	21431 NW	13th Court Unit # 2	216			
	Mic					
		ami, Florida 33169 ty/State and Zip Code)				
For further information co	oncerning this matter, pleas	e call:				
Kamara Sanon		_at (_954_) _559-3	657			
(Name o	of Person)	(Area Code & Daytime Tel-	ephone 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 Corporation: Clifton Building 2661 Executive Center C Tallahassee, FL 32301				

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

- (Mu	Divine Design st end with the words "Limited Lia	By KS, LLC ability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Ad The mailing addres		principal office of the Limited Liability	Company	is:
Principal Office A	ddress:	Mailing Address:		
21431 NW 13th Court I	Unit #216 Miami, FL 33169	21431 NW 13th Court Unit #216 Miami, FL 3	33169	
business entity with an a	ctive Florida registration.) Florida street address of the  Jasoi  Nam	n Sanon	08 MAR -3	SECRETARY DIVISION OF O
21431 NW 13th Co		Court Unit #216_address (P.O. Box NOT acceptable)	PH	
		<del></del>	2: 02	STAT
	City, State	ni, <sub>FL</sub> 33169	N	

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

	Title:		Name and Address:	
	"MGR" = Manager			
	"MGRM" = Manag	ging Member		
	MGR		Kamara Sanon	
		-	21431 NW 13th Court Unit #216 Miami, FL 33169	
	MGR		Jason Sanon	
		-	21431 NW 13th Court Unit #216 Miami, FL 33169	
		-		
		_	•	
	(Use attachment if	nacaccami)		
	(Ose attachment ii	necessary)		
ARTIC	CLE V: Effective da	te, if other than the date	e of filing: (OPTIONAL)	
			ecific and cannot be more than five business days pr	ior
to or 9	0 days after the date	e of filing.)		
			<b>/</b>	
	REQUIRED SIGN	NATURE:	\/	
			X	
			()	
	=			
	S	ignature of a member or	an authorized representative of a member.	
	(	In accordance with section of this document constitutes that the facts stated herein	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury are true.)	
			on Sanon	
	-		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)