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B. KOHR

APR - 2 2008

EXAMINER



ACCOUNT NO. : 072100000032

REFERENCE: 510877

AUTHORIZATION : Spelle Rena

COST LIMIT : \$ 125.00

ORDER DATE: April 1, 2008

ORDER TIME : 3:57 PM

ORDER NO. : 510877-010

CUSTOMER NO: 4338051

DOMESTIC FILING

NAME: SK INTERIORS, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Roath - EXT. 2955

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY ÉTÉMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	ORIDA LIVITED LIABILITY COMPANY
SK Interiors, LLC (Must end with the words "Limited Liabili	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
205 Worth Avenue, Suite 311 Palm Beach, FL 33480	205 Worth Avenue, Suite 311 Palm Beach, FL 33480
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Corporation Service Cor	npany
1201 Hays Street	
Tallahassee	ress (P.O. Box <u>NOT</u> acceptable) FL 32301
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S Tapany MULLIAM

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Sheila Kerwin 205 Worth Avenue, Suite 311 Palm Beach, FL 33480
·	
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be or 90 days after the date of filing.)	e date of filing: (OPTIONAL) ne specific and cannot be more than five business days prior

REQUIRED SIGNATURE:

Vite Jamely authorized lepresentaive Signature of a member or an authorized epresentative 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.)

Peter T. Donnelly, authorized representative

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)