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SECRETARY OF STATE

T. CLINE

SEP - 9 2008

EXAMINER

KENNEDY INVESTMENTS, INC.

September 5, 2008

Sent via USPS 1st Class Mail

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

To Whom It May Concern:

Per Jay Kennedy's request, I am enclosing the Articles of Organization and fees for filing. This request pertains to KB Investment Management, LLC. Thank you in advance for your assistance.

We request that you please mail all correspondence regarding this matter to:

Mr. Joseph Kennedy Kennedy Investments, Inc. 3410 Henderson Blvd., #200 Tampa, FL 33609

Phone: 813-554-1200

Please call with any questions.

Karen Dienesch-Calamari

Office Manager

Enc.

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COVER LETTER

Division of Co				
_{SUBJECT:} KB Inv	estment Managem	ent, LLC		
	(Name of Limite	d Liability Compa	any)	
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing	g.	
Please return all corresp	ondence concerning this matte	er to the following	ç;	
Joseph Ke	ennedy			
	(1	Name of Person)		
Kennedy I	nvestments, Inc.			
-	(Firm/Company)		
3410 Hen	derson Blvd. #200			
		(Address)		Is a
Tampa, Fl	_ 33609			- Se - Se
	(City.	/State and Zip Code	:)	A - 8
For further information	concerning this matter, please	call:		-8 PM12: 40 ASSEE, FLORIO
Joseph Kenne	at (_ 813	554-120	0 UNITE 12: 4C	
(Name	of Person)	(Area Cod	e & Daytime Tele	ephone Number)
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & [Certificate of Status	\$155.00 Filin Certified Co (additional cop	ру	\$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	Registrati Division Clifton B 2661 Exe	purier Address ion Section of Corporations suilding ecutive Center Cosee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

KB Investment Management, I	LC	
(Must end with the words "Limite	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited Liabi	lity Company is:
Principal Office Address:	Mailing Address:	4 122
3410 Henderson Blvd. #200	3410 Henderson Blvd. #200	TO SECOND
Tampa, FL 33609	Tampa, FL 33609	TIO D
		53m − ∞
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address o	stered Office, & Registered Agent's Sin Registered Agent. You must designate an individua	ignature:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	stered Office, & Registered Agent's Sin Registered Agent. You must designate an individual	ignature:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address o	stered Office, & Registered Agent's Sin Registered Agent. You must designate an individual	ignature:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address o	stered Office, & Registered Agent's Sin Registered Agent. You must designate an individual of the registered agent are: Name	ignature:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Loseph Kennedy 3410 Henderson	stered Office, & Registered Agent's Sin Registered Agent. You must designate an individual of the registered agent are: Name	ignature:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Loseph Kennedy 3410 Henderson	stered Office, & Registered Agent's Sim Registered Agent. You must designate an individual of the registered agent are: Name Blvd. #200 reet address (P.O. Box NOT acceptable)	ignature:

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) 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:

Title: "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
Width Wallaging Wellber		
MGR	Joseph Kennedy	
	5010 W. Dickens Ave.	
	Tampa, FL 33629	
MGR	Erin Bohacek	
	3215 W. San Nicholas St.	
	Tampa, FL 33629	
		
		
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		S C C C C C C C C C C C C C C C C C C C
(Use attachment if necessary)		
(Ose attachment if necessary)		- 68 R
LE V: Effective date, if other than th	e date of filing: 9/25/08	(OPTION?
fective date is listed, the date must l	be specific and cannot be more than five	

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.)

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)