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SECRETARY OF STATE

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**EXAMINER** 

## **COVER LETTER**

TO: Registration Division of C		,
SUBJECT: K&S C	Cape Properties, LLC	
	(Name of Limit	ted Liability Company)
The enclosed Articles	of Organization and fee(s) are	submitted for filing.
Please return all corres	pondence concerning this mat	ter to the following:
Christine M	1. Dziak	
		(Name of Person)
Ulmer & B	Serne LLP	
<del> </del>		(Firm/Company)
1660 West	2nd Street, Suite 110	0
And the second of the second o		(Address)
Cleveland,	Ohio 44113-1448	
<del></del>	(Cit	ty/State and Zip Code)
For further information	concerning this matter, please	e call:
Christine M. Dz	iak	at ( 216 ) 583-7064
(Nam	e of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check f	or the following amount:	SECRETALLAHA
<b>⊠\$</b> 125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	U\$155.00 Filing Fee & U\$160.00 Filing Fee,  Certified Copy Certificate of Status ®  (additional copy is enclosed) 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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
K&S Cape Properties, LLC	
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
505 South Flagler Drive, Suite 401	505 South Flagler Drive, Suite 401
West Palm Beach, FL 33401	West Palm Beach, FL 33401
The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)  The name and the Florida street address of the re  Sheldon Fromson  Name	
505 South Flagler Drive,	Suite 401
	ress (P.O. Box NOT acceptable)
West Palm Beach	<sub>FL</sub> 33401
City, State, ar	
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, FS

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Man	ager	Name and Address:	
"MGRM" = M	anaging Member		
MGR		Sheldon Fromson	
		505 South Flagler Drive, Suite 40	01
		West Palm Beach, FL 33401	
			<del></del>
	<del></del>	AA	
	nt if necessary)		
LE V: Effective factive date is days after the	ve date, if other than the listed, the date must be date of filing.)	date of filing: ((e specific and cannot be more than five bus	OPTIONA siness days
LE V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.)	e specific and cannot be more than five bus	OPTIONAI
LE V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.)  SIGNATURE:  Signature of a membé	e specific and cannot be more than five bus  for an authorized representative of a member.	siness days
LE V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.)  SIGNATURE:  Signature of a membé (In accordance with sec	r or an authorized representative of a member.  ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penaltics of perjury	siness days
LE V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.)  SIGNATURE:  Signature of a member of this document constitution of the date of t	r or an authorized representative of a member.  ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penaltics of perjury herein are true.)	siness days
LE V: Effective date is days after the	Signature of a member of this document constitute that the facts stated he sheldon Fromso	r or an authorized representative of a member.  ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penaltics of perjury herein are true.)	SECRETARY
LE V: Effective date is days after the	Signature of a member of this document constitute that the facts stated have stated have a stated ha	r or an authorized representative of a member.  ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury iterein are true.)	SECRETAR