(Requestor's Name)
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(Document Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 29, 2009

TYRONE JULIAN GREEN P.O. BOX 1009 LAKE HAMILTON, FL 33851

SUBJECT: KINETIC INTERNATIONAL CONSULTING CORPORATION, LLC

Ref. Number: W09000020112

We have received your document for KINETIC INTERNATIONAL CONSULTING CORPORATION, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORPORATION." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Limited Liability Companies are not corporations. Limited Liability Companies are unique business entities with special characteristics and attributes formed under Chapter 608, Florida Statutes. Corporations, on the other hand, are formed under Chapter 607, Florida Statutes, and possess other distinctive traits and characteristics. Consequently, limited liability company documents cannot contain any references/terms which may implicate the entity is a corporation. Please delete any references to the term "corporation" or the like from your 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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 209A00014402

COVER LETTER

	Registration Section Division of Corporations	
SUBJEC	CT: Kinetic International Consulting Corporation, LLC	
502020	(Name of Limited Liability Company)	
The encl	losed Articles of Organization and fee(s) are submitted for filing.	
Please re	eturn all correspondence concerning this matter to the following:	
Ţ	Tyrone Julian Green	
	(Name of Person)	_
ł	Kinetic International Consulting Corporation, LLC	
_	(Firm/Company)	
6	650 Lake Crystal Rd (physical), P.O. Box 1009 (mailing)	
	(Address) ガット	9004
L	Lake Hamilton, FL 33851	Y Y Y 0004
_	(City/State and Zip Code)	
For furth	r or	ี
Tyron		ည သ
	(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed	ed is a check for the following amount:	
□\$125.00	0 Filing Fee \$130.00 Filing Fee & \$\sumsymbol{\sum}\sumsymbol{\s	Ż

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

(additional copy is enclosed)

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabi	lity Company is:				
	nternational Consumords "Limited Liability Comp				
ARTICLE II - Address: The mailing address and street	address of the principa	l office of the Limited	Liability Co	mpany	is:
Principal Office Address:	<u>Mai</u>	ling Address:			
650 Lake Crystal Rd Lake Hamilton 33). Box 1487 dee, FL 33838			
ARTICLE III - Registered A (The Limited Liability Company cannot business entity with an active Florida re	serve as its own Registered Age				
The name and the Florida stree	et address of the register	red agent are:	SEUR FALLA	2009 HAY 15	Egil St. Frijander.
	Tyrone Julian Gre	en	HA F	AY	
<u> </u>	Name		SSE. YRY	15	
	650 Lake Crystal	Rd	m _G	PH	
Florida	street address (P.O. Box No.			င့်	
Lake Ha	ımilton 33851 _{m FL}		RATE RD,	: კგ	
	City, State, and Zip		>	J.	

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
General Manager	Tyrone Julian Green P. O. Box 1487 Dundee, FL 33838
	SECKE TALLAH
(Use attachment if necessary)	SSEC PA
oranist more at the deal of	
ffective date is listed, the date notes of the date of filing.)	nan the date of filing: (OPTIDAAL) nust be specific and cannot be more than five business days pr
ffective date is listed, the date not days after the date of filing.) <u>REQUIRED</u> SIGNATURE:	must be specific and cannot be more than five business days pr
ffective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this docume	nan the date of filing: (OPTIONAL)
ffective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this docume	must be specific and cannot be more than five business days prompted of an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution ent constitutes an affirmation under the penalties of perjury